

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Anthony Paletta				
Full Name of Contributor Anthony Paletta	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 255 W Kanawha Ave	Description of Item or Service Business Cards (Qty. 1000)	M 0	D 8	Y 1 Fair Market Value 52.74
City Columbus	State O Zip Code 43214	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Full Name of Contributor Anthony Paletta	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 255 W Kanawha Ave	Description of Item or Service Door Hangers (Qty. 1000)	M 0	D 9	Y 0 Fair Market Value 181.68
City Columbus	State O Zip Code 43214	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Full Name of Contributor Lori Gerald	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 449 Rosslyn Ave	Description of Item or Service Worthington Town Saver Oct. A	M 1	D 0	Y 0 Fair Market Value 240.00
City Columbus	State O Zip Code 43214	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO		

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]