



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee Friends of Stasi Trout						
Full Name of Contributor Rita Kitchen			Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address 3608 Dockside Ct	Description of Item or S campaign buttons				Date (MM/DD/YYYY) 08/17/2019	Fair Market Value \$52.00
City Hilliard		State OH	Zip Code 43026	Received at Fundraisin	ng Event?	
Full Name of Contributor			Employer, Occupation	n, Labor Organization*	Registration Number, if PAC	
Street Address Description of Item or S			Service		Date (MM/DD/YYYY)	Fair Market Value
City		State	Zip Code	Received at Fundraisi	ng Event?	
Full Name of Contributor			Employer, Occupation	on, Labor Organization* Registration Number, if PAC		
Street Address	Description	on of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value
City	5	State	Zip Code	Received at Fundraisin	ng Event?	
Full Name of Contributor			Employer, Occupation	n, Labor Organization*	abor Organization* Registration Number, if PAC	
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City State		State	Zip Code	Received at Fundraisi	ng Event?	
Full Name of Contributor			Employer, Occupation, Labor Organization* R		Registration Number, if PAC	
treet Address Description of Item or S		Service		Date (MM/DD/YYYY)	Fair Market Value	
City State		Zip Code	Received at Fundraisi	ng Event?		

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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 also appear. [R.C. 3517.10(B)(4)]

	52.00	
Page Total \$		