



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

| Full Name of Committee | | | | | | | |
|--------------------------|---------------------------------------|---|---|--------------------------------|-----------------------------|-------------------|--|
| Citizens for Mingo | | | | | | | |
| Full Name of Contributor | | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC | | |
| Cindi Becker | | | | | | | |
| Street Address | Description of Item or Service | | | | Date (MM/DD/YYYY) | Fair Market Value | |
| 3046 Bretton Woods Dr | Food & Beverage; 10/29 Event 10/29/20 | | | | | 275.58 | |
| City | Sta | te | Zip Code Received at Fundraising Event? | | | | |
| Columbus OH | | | 43231 | ⊠ Yes ☐ No | No | | |
| Full Name of Contributor | | | Employer, Occupation | n, Labor Organization* | Registration Number, | if PAC | |
| Street Address | Description of Item or S | | | Service | | Fair Market Value | |
| City | Sta | te | Zip Code | Received at Fundraisi | ng Event? | | |
| | | \Box | | ☐ Yes ☐ No | | | |
| 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 | Sta | te 🔽 | Zip Code | Received at Fundraisi | ng Event? | | |
| Full Name of Contributor | | Employer, Occupation | n, Labor Organization* | n* Registration Number, if PAC | | | |
| Street Address | Description | of Item or S | Service | | Date (MM/DD/YYYY) | Fair Market Value | |
| City | Sta | te | Zip Code | Received at Fundraisi | ng Event? | | |
| | | | | ☐ Yes ☐ No | | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC | | | |
| Street Address | et Address Description of Item or S | | Service | | Date (MM/DD/YYYY) | Fair Market Value | |
| City State | | te | Zip Code Received at Fundraising Event? | | | | |
| | | \Box | | ☐ Yes ☐ No | | | |

| Page Total \$ | 275.58 | |
|---------------|--------|------|
| | | |

^{*} 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)]