

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Committee to OVERTURN MSC REZONING			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Priscilla MEAD			
Street Address	Description of Item or Service	M	D
1399 LaRochelle Drive	T-shirts	07	01
City	State	Y	Fair Market Value
UPPER ARLINGTON	OH	14	131.81
	Zip Code	Received at Fundraising Event?	
	43221	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Bill DiMascio			
Street Address	Description of Item or Service	M	D
3509 Rue De Fleur	FLYERS	07	01
City	State	Y	Fair Market Value
UPPER ARLINGTON	OH	14	223.16
	Zip Code	Received at Fundraising Event?	
	43221	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Jackie JERABEK			
Street Address	Description of Item or Service	M	D
1356 La Rochelle Drive	WEB SERVICE UPDATING	07	01
City	State	Y	Fair Market Value
UPPER ARLINGTON	OH	14	60.00
	Zip Code	Received at Fundraising Event?	
	43221	<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
			Fair Market Value
City	State	Y	
	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
			Fair Market Value
City	State	Y	
	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
			Fair Market Value
City	State	Y	
	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
			Fair Market Value
City	State	Y	
	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
			Fair Market Value
City	State	Y	
	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 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)]