

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

| Name of Committee in Full<br><b>TAXPAYERS FOR WESTERVILLE SCHOOLS</b> |  |   |                             |                                   |
|---|--|---|-----------------------------|-----------------------------------|
| Full Name of Contributor<br><b>JAMES E BURGESS</b>                    | Employer, Occupation, Labor Organization *           |   | Registration Number, if PAC |                                   |
| Street Address<br><b>4930 HONEYSUCKLE BLVD</b>                        | Description of Item or Service<br><b>DOMAIN NAME</b> |   | M<br><b>0</b>               | D<br><b>6</b>                     |
| City<br><b>COLUMBUS</b>   | State<br><b>OH</b>                                   | Zip Code<br><b>43230</b>  | Y<br><b>1</b>               | Fair Market Value<br><b>15.17</b> |
| 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                                 |
| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| 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                                 |
| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| 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                                 |
| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| Received at Fundraising Event?  |  | <input type="checkbox"/> YES <input type="checkbox"/> NO            |                             |                                   |
| Full Name of Contributor  | Employer, Occupation, Labor Organization *           |   | Registration Number, if PAC |                                   |
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| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| Received at Fundraising Event?  |  | <input type="checkbox"/> YES <input type="checkbox"/> NO            |                             |                                   |
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| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| Received at Fundraising Event?  |  | <input type="checkbox"/> YES <input type="checkbox"/> NO            |                             |                                   |
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| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| 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                                 |
| City  | State  | Zip Code  | Y                           | Fair Market Value                 |
| 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)]