



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee						
Sheryl Munson for Judge Committee						
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC	
In Kind at Fundraising Less than \$325						
		scription of Item or Service			Date (MM/DD/YYYY)	Fair Market Value
		Tab at 12-10-19 Fundraiser			12/10/2019	80
City		State	Zip Code	Received at Fundraisi	ng Event?	
				⊠ Yes		
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address Description of		ion of Item or S	ervice		Date (MM/DD/YYYY)	Fair Market Value
City	!	State	Zip Code	Received at Fundraisi	ng Event?	
				☐ Yes ☐ No		
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address Description of Item or		ion of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value
City	1;	State	Zip Code	Received at Fundraisi	ng Event?	
				☐ Yes ☐ No		
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address Description of Item or		ion of Item or S	l Service		Date (MM/DD/YYYY)	Fair Market Value
City		State	Zip Code Received at Fundrai		ing Event?	
				☐ Yes ☐ No		
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address Description of Iter		ion of Item or S	r Service		Date (MM/DD/YYYY)	Fair Market Value
City State		State	Zip Code Received at Fundraising Event?			
				☐ Yes ☐ No		
			l .			

Page Total \$_	80	

^{*} 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)]