

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Nixon for Trustee			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Angela M. Nixon	self-employed		
Street Address	Description of Item or Service	M	D
5370 Edgeview Rd	Campaign signs	09	27
City	State	Y	Fair Market Value
Columbus	OH	11	507.06
	Zip Code	Received at Fundraising Event?	
	43207	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Angela M. Nixon	Self-employed		
Street Address	Description of Item or Service	M	D
5370 Edgeview Rd	door hangers	09	20
City	State	Y	Fair Market Value
Columbus	OH	11	291.83
	Zip Code	Received at Fundraising Event?	
	43207	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Angela M. Nixon	Self-employed		
Street Address	Description of Item or Service	M	D
5370 Edgeview Rd	T-shirts	09	01
City	State	Y	Fair Market Value
Columbus	OH	11	76.86
	Zip Code	Received at Fundraising Event?	
	43207	<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	Y	Fair Market Value
	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
City	State	Y	Fair Market Value
	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
City	State	Y	Fair Market Value
	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
City	State	Y	Fair Market Value
	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
City	State	Y	Fair Market Value
	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)]