In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full							
Nivon for Irustee		ion, Labor Organization*	In		504.6		
Full Name of Contributor Angela M. Nixon	Self-en	Registration Number, if PAC					
Street Address 5	Campaian Signs		0 9 2 7 1 Fair Market Value 507.06				
City		Zip Code 43267	Received at Fundraising Event?				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC				
Angela M. Nixon	Self employeed						
Street Address) 5370 Edgeview Ru	Description of Item or Service down nangers State Zip Code		M 9 D Y Fair Market Value 291.83				
Columbus	OH	Received at Fundraising Event?					
Full Name of Contributor	1 / 10	ion, Labor Organization*	Registration Number, if PAC				
HYGCIU M. NIXON Street Address	Description of Item	<u>uplayed</u>	м	D Y	Fair Market Value		
5370 Edgeview Rd	T-shir	·ts	1 - 1 1 1 -	090111 76.86			
Columbus	Sta te	zip Code 143207	Received at Fundraising Event?				
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registratio	n Number, i	f PAC		
Street Address	Description of Item	or Service	M D Y Fair Market Value				
City	Sta te	Zip Code	Received at Fundraising Event?				
Full Name of Contributor	Employer, Occupation, Labor Organization*		C YES NO Registration Number, if PAC				
Street Address	Description of Item or Service		M	D Y	Fair Market Value		
City	Sta te	Zip Code	Received at Fundraising Event?				
Full Name of Contributor	Employer, Occupation, Labor Organization*		☐ YES ☐ NO Registration Number, if PAC				
Street Address	Description of Item or Service		M	D Y	Fair Market Value		
City	Sta te	Zip Code	Received a	ı Fundraisir	ng Event?		
Full Name of Contributor	Employer Occupat	tion, Labor Organization*	C YES	n Number,	□ NO if PAC		
Pull Name of Conditionor	Employer, Occupan	,	Regiseration				
Street Address	Description of Item or Service		М	D Y	Fair Market Value		
City	Sta te	Zip Code		t Fundraisin	ng Event?		
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC				
Street Address	Description of Item or Service		M	D Y	Fair Market Value		
Ciry	Sta te	Zip Code	1 -	t Fundraisi	_		
	.4		☐ YES		□ NO		

Page Total \$ 875,75

^{*} 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)]