In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full		
Citizens For Baker		
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
Stacie Baker		
Street Address	Description of Item or Service	M D Y Fair Market Value
1101 Bergenia Dr	Campaign Website	0 3 2 6 1 7 (\$141.34
City	Sta te Zip Code	Received at Fundraising Event?
Reynoldsburg	OH 43068	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	
Stacie Baker		
Street Address	Description of Item or Service	M D Y Fair Market Value
1011 Bergenia Dr	Name Tag	0 3 0 9 1 7 \$15.05
City	State Zip Code	Received at Fundraising Event?
Reynoldsburg	OH 43068	YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
Stacie Baker		
Street Address	Description of Item or Service	M D Y Fair Market Value
1101 Bergenia Dr	Pay Pal Fess	0 4 1 4 1 7 \$10.83
City	State Zip Code	Received at Fundraising Event?
<u> </u>	OH	YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
<u></u>		
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
	OH	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
Street Address	De-sinking of Itam or Somian	M D Y Fair Market Value
Street Address	Description of Item or Service	M U I Fan Warket value
Cir.	State Zip Code	Received at Fundraising Event?
City	OH Zip Code	
Full Name of Contributor	Employer, Occupation, Labor Organization	YES NO Registration Number, if PAC
ruii Name of Controdior	Employer, Occupation, Labor Organization	Registration Number, it is
Street Address	Description of Item or Service	M D Y Fair Market Value
Silver Address	Description of Relia of Softwee	174 Distriction
City	State Zip Code	Received at Fundraising Event?
City	OH Production	
Full Name of Contributor	Employer, Occupation, Labor Organization	YES NO Registration Number, if PAC
Tan Name of Control of		,
Street Address	Description of Item or Service	M D Y Fair Market Value
	1	
City	State Zip Code	Received at Fundraising Event?
	OH	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	
Street Address	Description of Item or Service	M D Y Fair Market Value
	1	u u u u u u u u u u u u u u u u u u u
City	State Zip Code	Received at Fundraising Event?
	OH	OYES O 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)]