31-J-1
R.C. 3517.10

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## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full						<del></del>		
Committee to Re-Elect Marc Schare								
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC					
Citizens For Duffev								
Street Address	Description of Item or Service		М	D	Y	Fair Market Value		
645 Farrington Drive	Mailing		110	2 1	113	2,754.28		
City	State Zip Code			Received at Fundraising Event?				
Worthington	O   H   43085			☐ YES ☑ NO				
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC					AC		
Douglas J. Preisse	Vanmeter, Ashbrook and Asc							
Street Address	Description of Item or Service		М	D	Y	Fair Market Value		
41 S. High Street		Mailing		01	1113	368.00		
City	State	Zip Code			raising E			
Columbus		43215		YES		✓ No		
Full Name of Contributor		pation, Labor Organization *	Registra	tion Nun	ber, if P	AC		
			· · · · · · · · · · · · · · · · · · ·					
Street Address	Description of It	em or Service	М	D	ΙΥ	Fair Market Value		
	,				Ιì			
City	State	Zip Code	Receive	d at Fond	lraising E			
	1			YES		□ NO		
Full Name of Contributor	Employer Occur	nation, Labor Organization *		_	ber, if Pa			
	in project, over	sanon, savor organisation	110813111	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
Street Address	Description of Item or Service		М	D	ΙΥ	Fair Market Value		
			1 1	<u> </u>	Ι'n			
City	State	Zip Code	Receiver	l at Fund	Iraising E	_L		
				YES		□ 20		
Full Name of Contributor	Employer Occur	nation, Labor Organization *			her if Pa			
Tall Paint of Commons	isinployer, occup	imployer, Occupation, Labor Organization			Registration Number, if PAC			
Street Address	Description of Its	Description of Item or Service		D	ΙΥ	Fair Market Value		
	J. C.		M			Tun Irianite Tunav		
City	State	Zip Code	Receive	d at Fund	lraising E	Vent?		
City	j.	Zip code		YES	iraising L	□ NO		
Full Name of Contributor	Employer, Occup	Registration Number, if PAC						
Tail Maine of Controller	Employer, Occup	Registration Number, if 1770						
Street Address	Description of It	om or Sarvino	М	D	ΙΥ	Fair Market Value		
SHEET Address	Description of to	thi or service	100		1 1	t all trial ket value		
City	State	Zip Code	Dacaina	d at Fund	lraising E	Luant?		
city	State	Zip Code	_	YES	naising t	NO NO		
Full Name of Contributor	Employer Occur	pation, Labor Organization *			ber, if P			
Pan Name of Controllor	Employer, Occup	pation, Labor Organization	Registra	tion ivun	iter, ii Pz			
0	D 12 Ch D 1		M	I n	1 1/	In the same		
Street Address	Description of Item or Service		M	D	Y	Fair Market Value		
		Te: 5 .	<del>                                     </del>	<u> </u>	<u> </u>	<u> </u>		
City	State	Zip Code			lraising E	_		
		<u> </u>		YES				
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registra	tion Nun	ber, if Pa	AC		
				T ==	1	In a second		
Street Address	Description of It	em or Service	M	D	Y	Fair Market Value		
			1					
City	State	Zip Code			traising E	_		
				YES		∐ ×0		

<sup>\*</sup> 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)]