

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friend of Michelle Mineo				
Full Name of Contributor Beth Sauer		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 104 North Remington Rd		Description of Item or Service meet and greet - food and beverage		M D Y Fair Market Value 1 0 2 0 1 7 \$50.00
City Columbus		State OH	Zip Code 43209	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Amy Lee Blank		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 275 S Columbia Ave		Description of Item or Service Meet and Greet - Food and Beverage		M D Y Fair Market Value 1 0 2 1 1 7 \$100.00
City Columbus		State OH	Zip Code 43209	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Nancy Barr		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 842 S Roosevelt Ave		Description of Item or Service Meet and Greet - Food and Beverage		M D Y Fair Market Value 1 0 2 9 1 7 \$50.00
City Columbus		State OH	Zip Code 43209	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Michelle Mineo		Employer, Occupation, Labor Organization* self employed		Registration Number, if PAC
Street Address 783 S Cassingham Rd		Description of Item or Service remainder of load donation		M D Y Fair Market Value 1 2 0 8 1 7 \$10.00
City Bexley		State OH	Zip Code 43209	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
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
City		State	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
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
City		State	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
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
City		State	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
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
City		State	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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)]