

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee to Elect Bob Fitrakis</b>			
Full Name of Contributor <b>Suzanne M. Patzer</b>	Employer, Occupation, Labor Organization* <b>CSCC / Admin</b>	Registration Number, if PAC <b>NA</b>	
Street Address <b>1021 E. Broad St.</b>	Description of Item or Service <b>Flyer printing</b>	M <b>1</b>	D <b>2</b>
City <b>Columbus</b>	State <b>OH</b>	Y <b>2</b>	Fair Market Value <b>\$85.00</b>
Full Name of Contributor	Employer, Occupation, Labor Organization*	Y <b>2</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Street Address	Description of Item or Service	Y <b>2</b>	Fair Market Value
City	State <b>OH</b>	Y <b>2</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Y <b>2</b>	Registration Number, if PAC
Street Address	Description of Item or Service	Y <b>2</b>	Fair Market Value
City	State <b>OH</b>	Y <b>2</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Y <b>2</b>	Registration Number, if PAC
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Street Address	Description of Item or Service	Y <b>2</b>	Fair Market Value
City	State <b>OH</b>	Y <b>2</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" 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)]

Page Total **\$85.00**