



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee						
neighbor For burga						
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Frank Reed						
Street Address	The state of the s			Date (MM/DD/YYYY)	Fair Market Value	
817 Hewart Ruly	event			10/23/19 491.82		
City	State	Zip Code	Received at Fundraisi	ng Event?		
Desley	Dh	9 3 209 Xyes \(\square\) No				
Full Name of Contributor Employer, Occupation, Labor Organization				Registration Number, if PAC		
Robert M. Bign Street Address 1539 Strule Dr						
reet Address Description of Item or Service				Date (MM/DD/YYYY)	Fair Market Value	
	FB Ms			11/5/19	2500	
City	State	Zip Code	Received at Fundraisi	ng Event?		
Regn	04	43068	☐ Yes ☐ No			
Full Name of Contributor		Employer, Occupation, Labor Organization* Registration Number, if PAC				
Street Address	Service		Date (MM/DD/YYYY) Fair Market Value			
City State		Zip Code	Code Received at Fundraising Event?			
			☐ Yes ☐ No			
Full Name of Contributor		Employer, Occupation, Labor Organization* Registration Number, if PAC		if PAC		
Street Address	Service		Date (MM/DD/YYYY)	Fair Market Value		
City	State	Zip Code	Received at Fundraisi	ng Event?		
			☐ Yes ☐ No			
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address Description of Item or		Service		Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code Received at Fundraising Event?				
			☐ Yes ☐ No			
	1					

Page Total \$ 2991.82

^{*} 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)]