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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							
Paley for Columbus			and the second s				
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	Receive	d at Fund YES	raising Ev	vent?	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Franklin County Democratic Party							
Street Address 271 E. State St.	Description of Item or Service Petition Drive		M 0 6	D 1 2	0 9	Fair Market Value 1,500.00	
City Columbus	State H	Zip Code 43215			raising Ev		
Full Name of Contributor			Registration Number, if PAC				
Franklin County Democratic Party	Employer, Occupation, Labor Organization *			Registration Number, it FAC			
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
271 E. State St.	Campaign Staff			1 7		1,000.00	
City	State	Zip Code	Receive		raising Ev		
Columbus	$o \mid H$	43215		YES		☑NO	
Full Name of Contributor Franklin County Democratic Party	Employer, Occup	oation, Labor Organization *	Registra	tion Num	ber, if PA	.C	
Street Address			M	D	Y	Fair Market Value	
271 E. State St.	Campaign Director		0 6	17	0 9	1,433.33	
City	State	Zip Code	Receive	d at Fund YES	raising Ex		
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
City	State	Zip Code	Receive	d at Fund YES	raising Ev	vent?	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Employer, Occupation, Labor Of			100000	quantum			
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
City	State	Zip Code	Receive	d at Fund YES	raising Ev	vent?	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
City	State	Zip Code	Receive	1 at Fund	raising Ev	<u> </u>	
		_	Receive	YES	raising LV	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	Receive	d at Fund YES	raising Ev	vent?	

Page Total \$ 3,933.33

^{*} 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)]