3	1-	J-	l		
R.	C.	35	1	7,10	

Page_	7_
_	

## In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	<del></del>	
Friends of Kristin Bryant		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
James McKean		
Street Address	Description of Item or Service	M D Y Fair Market Value
	Event Expense	1+0 1 5 1 5 51.22
City	State Zip Code	Received at Fundraising Event?
Revnoldsburg	O ! H   43068	✓ YES 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?  YES NG
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?  YES NG
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?  YES 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?  YES 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?  YES 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?  YES NG
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?  YES NO

Page Total S	51.22

<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)]