Page 3 on orginal report

3-J-1	
R.C. 3517.10	ı

In-Kind Contributions Received

	3	
Dane	J	
rage		

Prescribed by Secretary of State 03/05

Full Name of Contributor	Employer, Occi	ipation, Labor Organization*	Registration Number, i	FPAC
Westerville Professional Fire Fighters IAFF Local 3480	Description of Item or Service News Service ads in support of levy			
Street Address			M D Y	
171 Brighton Road			0 3 0 7 1 6 \$312.50	
City	Stalite OH	Zip Code	Received at Fundraism	-
Columbus		43202		O NO
Full Name of Contributor Otterbein University	Description of Item or Service Printing of door to door drop literature		Registration Number, i	IPAC
Street Address			M D Y	Fair Market Val
1 South Grove Street			031016	\$2,075.50
City	Stalte	Zip Code	Received at Fundraisin	
Westerville	ОН	43081	OYES	O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Westerville Professional Fire Fighters IAFF Local 3480				
Street Address	Description of I	tem or Service	M D Y	
171 Brighton Road	Placement of Levy material on Facebook		031616	
City	Sta te	Zip Code	Received at Fundraisin	ge Event?
Columbus	ОН	43202		⊙ №
Full Name of Contributor	Employer, Occi	upation, Labor Organization*	Registration Number, i	a PAC
Westerville Professional Fire Fighters IAFF Local 3480	D. Let Sh. Carlos		M D Y	Fair Market Val
Street Address	Description of Item or Service		0 3 3 1 1	
171 Brighton Road	Placement of Levy material on Facebook Stalte Zip Code		Received at Fundraisin	<u> </u>
City Cotumbus	OH	43202		О NO
Full Name of Contributor		apation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service		M D Y	Fair Market Val
City	State	Zip Code	Received at Fundraisin	ıg Event?
	OH		OYES ONO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number,	if PAC
Street Address	Description of Item or Service		M D Y	Fair Market Va
Succe reality				
City	Sta te	Zip Code	Received at Fundraisin	ng Event?
•	OH		O YES	O NO
Full Name of Contributor	Employer, Occ	upation, Labor Organization*	Registration Number,	if PAC
Street Address	Description of Item or Service		M D Y	Fair Market Va
City	State Zip Code OH		1 _	
7 T. N. T. C.	Employer, Occupation, Labor Organization*		OYES Registration Number,	O NO IFPAC
Full Name of Contributor	строуст, соприня паки оздавили			
Street Address	Description of	Item or Service	M D Y	Fair Market Va
			11111	1

Page Total \$2,418.00

^{*} 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)]