

## In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>CITIZENS FOR RANKIN</b>				
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>MAGNETIC TAPE</b>		M   D   Y   Fair Market Value 0   6   2   0   0   5   6.43
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>T-SHIRTS</b>		M   D   Y   Fair Market Value 0   6   2   3   0   5   101.85
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor <b>BILL HEDRICK</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>838 THURBER DRIVE WEST</b>		Description of Item or Service <b>POSTAGE</b>		M   D   Y   Fair Market Value 0   6   3   0   0   5   59.20
City <b>COLUMBUS</b>		State O   H	Zip Code <b>43201</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor <b>BILL HEDRICK</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>838 THURBER DRIVE WEST</b>		Description of Item or Service <b>FOOD, BEVERAGES</b>		M   D   Y   Fair Market Value 0   7   1   4   0   5   64.00
City <b>COLUMBUS</b>		State O   H	Zip Code <b>43201</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>POSTAGE</b>		M   D   Y   Fair Market Value 0   8   0   3   0   5   29.60
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>YARD SIGNS</b>		M   D   Y   Fair Market Value 0   8   1   9   0   5   1,763.75
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>POSTAGE</b>		M   D   Y   Fair Market Value 0   9   2   6   0   5   37.00
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor <b>MIKE R. RANKIN</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>2432 WYNCOURTNEY COURT</b>		Description of Item or Service <b>POSTAGE</b>		M   D   Y   Fair Market Value 1   0   0   3   0   5   925.00
City <b>POWELL</b>		State O   H	Zip Code <b>43065</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

\* Required for contributions from individual over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]