In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full CITIZENS FOR RANKIN				
Full Name of Contributor	I	and the second second second	T5 **	
SAIA & PIATT, PLL	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Street Address	Description of Item or Service		M D	Y Fair Market Value
713 S. FRONT STREET	INVITATIONS		0 9 2 1	I I
City	State Zip Code		Received at Fundraising Event?	
COLUMBUS	O H 43215		VES NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
SAIA & PIATT, PLL				
Street Address	Description of Item or Service		M D	Y Fair Market Value
713 S. FRONT STREET		POSTAGE	0 9 2 1	185.00
City	State	Zip Code	Received at Fu	ndraising Event?
COLUMBUS	O H		YES	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
SAIA & PIATT, PLL				
Street Address	Description of Item or Service		M D	Y Fair Market Value
713 S. FRONT STREET	FOOD, BEVERAGES		0 9 2 1	
COLUMBUS	State	Zip Code		ndraising Event?
Full Name of Contributor	O H	43215	YES	NO NO
OHIO DEMOCRATIC PARTY	Employer, Occ	upation, Labor Organization *	Registration Nu	Imber, if PAC
Street Address	Description of	Itam or Canica	M D	L V IE-in Markon Value
271 E. STATE STREET	Description of Item or Service POLITICAL CONSULTANT		$\begin{bmatrix} M & D \\ 0 & 9 & 2 & 8 \end{bmatrix}$	Y Fair Market Value 2,000.00
City	State Zip Code			ndraising Event?
COLUMBUS	O H	43215	VES	NO NO
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Street Address	Description of Item or Service		MD	Y Fair Market Value
	Description of	item of service		Fall Market Value
City	State	Zip Code	Received at Fu	
	j] '	YES	No
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Nu	imber, if PAC
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	State	Zip Code		ndraising Event?
			YES	40
Full Name of Contributor	Employer, Occi	upation, Labor Organization *	Registration Nu	mber, if PAC
Street Address				
Street Address	Description of Item or Service		MD	Y Fair Market Value
City	Charles	T7-0-4-		
orty	State	Zip Code	Received at Fur	ndraising Event?
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
			J	
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	Casas	7in Codo	Danis I i i	
Oity .	State	Zip Code	. —	ndraising Event?
		1	/ES	Ю

Page Total \$ ___2,922.50

^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupaton 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)]