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## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

		-				
Employer, Occupation, Labor Organization *		Registration Number, if PAC				
	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund YES	raising l	Event?	
Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Description of Iten	Description of Item or Service		D 	Y 	Fair Market Value	
State	State Zip Code		Received at Fundraising Event?  YES NO			
Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Description of Iten	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund YES	raising l	Event?	
Employer, Occupa	Employer, Occupation, Labor Organization • Registration Number, if PAC				PAC	
Description of Iten	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund YES	raising l	Event?	
Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Description of Iten	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund	raising l	Event?	
Employer, Occupa	Employer, Occupation, Labor Organization		Registration Number, if PAC			
Description of Item	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund YES	raising l	Event?	
Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Description of Iten	Description of Item or Service		D	Y	Fair Market Value	
State	State Zip Code		Received at Fundraising Event?  YES NO			
Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Description of Iten	Description of Item or Service		D	Y	Fair Market Value	
State	Zip Code	Receive	d at Fund YES	raising l	Event?	
	Description of Item  State  Employer, Occupa  Description of Item  State  Employer, Occupa	Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service  State   Zip Code    Employer, Occupation, Labor Organization *  Description of Item or Service	Description of Item or Service  State   Zip Code   Receive	Description of Item or Service  Description of Item or Service  Employer, Occupation, Labor Organization * Registration Num  Description of Item or Service  Employer, Occupation, Labor Organization * Registration Num  Description of Item or Service  Employer, Occupation, Labor Organization * Registration Num  Description of Item or Service  Description of Item or Service  Employer, Occupation, Labor Organization * Registration Num  Description of Item or Service  M D H D H D H D H D D D D D D D D D D D	Description of Item or Service    State   Zip Code   Received at Fundraising   YES	

77.57
Page Total S • 0.00

<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)]