In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Jonnmittee in Full NAS FOR JUDGE (PMMITT				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
PAVIA VENINO-					
Street Address	Description of Item or Service		M D	Y Fair Market Value	
6775 Manuay W.	KEFKESHMINTS		10198	7 175.00	
City	Sta te	Zip Code	Received at Fundrai	sing Event?	
WORTHUCTON	OH	43085	O YES	O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
DEALINE MICHAEL	ICE FRESHMENTS				
Street Address	Description of Item or Service		MD	Y Fair Market Value	
7719 14 CHENS UR.				7 45,00	
City	Sta te	Zip Code	Received at Fundrai	sing Event?	
UUBUN	OH	43017	YES	O NO	
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundrai	sing Event?	
	ОН		OYES	O NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number	r, if PAC	
Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundrais	sing Event?	
	OH		O YES O 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	Sta te	Zip Code	Received at Fundrais	sing Event?	
	ОН		O YES	O NO	
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Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundrais	sing Event?	
	ОН		O YES	O NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number	r, if PAC	
Street Address	Description of Item or Service		M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundrais	sing Event?	
	OH		OYES O 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	Sta te	Zip Code	Received at Fundrai	sing Event?	
	OH		O YES	O NO	
	1				

Page Total

^{*} 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)]