

## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full  Community Partnership for Education								
Community Partnership for Education  [Employer, Occupation, Labor Organization *   Registration Number, if PAC								
Ohio Association of Public School Emplo			abor Org.	Avgustation (Tumber, II FAC				
Street Address	Description of Item or Service			м	D	ΙY	Fair Market Value	
6805 Oak Creek Drive	phone banks			110	2 9	116	450.00	
City	State Zip Code		Received at Fundraising Event?					
Columbus		H	43229		YES		NO	
Full Name of Contributor	Emplo	yer, Occup	stion, Labor Organization *	Registration Number, if PAC				
Ohio Association of Public School Emplo		Labor Org.						
Street Address	Description of Item or Service			М	D	Y	Fair Market Value	
6805 Oak Creek Drive		phone banks			017	1 6	300.00	
City		State Zip Code			Received at Fundraising Event?			
Columbus	0	H	43229		YES		NO	
Full Name of Contributor			ation, Labor Organization *	Registration Number, if PAC				
Ohio Association of Public School Emplo		Labor Org.						
Street Address	Descri		m or Service	M	D	Y	Fair Market Value	
6805 Oak Creek Drive			robocalls	111	07		300.00	
Colombia	_ '	State	Zip Code	Receive	d at Fund YES	traising Ev	vent?	
Columbus Full Name of Contributor	Constan	H	43229	Danista.	,	- :CD4		
Puli Name of Controllor	Embro	yer, Occupi	ation, Labor Organization *	Registration Number, if PAC				
Street Address	Descri	Description of Item or Service			D	Y	Fair Market Value	
Ci.	<u> </u>	Chata	7:- C-1-	Bassins	d at Franci	traising Ev	L	
City	١ '	State	Zip Code	Keceive	YES	вяняній сл	NO	
Full Name of Contributor	Emplo	ver Occurs	ation, Labor Organization *	Registration Number, if PAC				
Tall Page Of Conditions	C.IIIpio	yor, Occup	enon, Lacor Organization					
Street Address	Descri	Description of Item or Service			D	Y	Fair Market Value	
City		State	Zip Code	Receive	•	traising Ev	<del></del>	
					YESNO			
Full Name of Contributor	Employ	yer, Occupa	ation, Labor Organization *	Registration Number, if PAC				
Street Address	Descri	Description of Item or Service			D	Y	Fair Market Value	
	·	_		1	1	1		
City	-	State	Zip Code	Receive	d at Fund	traising E	vent?	
					YES		□ NO	
Full Name of Contributor	Emplo	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
Street Address	Description of Item or Service			M	I D	ΤΥ	Fair Market Value	
NOT NOTED								
City		State	Zip Code	Receive	d at Fund	Iraising E	vent?	
Full Name of Contributor	Emplo	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
		D			T 5	TV	Rain Mades Value	
Street Address	Descri	Description of Item or Service			D	Y	Fair Market Value	
City	Sta		Zip Code	Receive	•	traising E		
	1	1	1	1 4	YES		∐NO	

<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)]