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## **In-Kind Contributions Received**

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Good Schools Committee	<u> </u>		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Hair Artists			
Street Address	Description of Item or Service	0 6 0 3 1 1 \$100.00	
2111 Polaris Pkwy.	Salon Spa Basket		
City	State Zip Code	Received at Fundraising Event?	
Columbus	OH 43240	O yes O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
North American Broadcasting Co.	Radio Station		
Street Address	Description of Item or Service	M D Y Fair Market Value	
1458 Dublin Road	Radio Advertising	0 6 0 3 1 1 \$1,000.00	
City	State Zip Code	Received at Fundraising Event?	
Columbus	OH 43215	⊕ YES NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	Me D Y Fair Market Value	
Cin.	State Zip Code	Received at Fundraising Event?	
City	OH Zip Code	•	
Full Name of Contribute	Employer, Occupation, Labor Organization*	YES NO Registration Number, if PAC	
Full Name of Contributor	Епірюусі, оссарацоп, Саоої отдапігаціої		
Street Address	Description of Item or Service	M D Y Fair Market Value	
City	Stal te Zip Code OH	Received at Fundraising Event?  O YES  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	State Zip Code	Received at Fundraising Event?	
	OH <sub>.</sub>	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	Stal te Zip Code OH	Received at Fundraising Event?  YES  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	Stal te Zip Code OH	Received at Fundraising Event?  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	Stal te Zip Code OH	Received at Fundraising Event?  OYES  O NO	

Page Total \$1,100.00

<sup>\*</sup> 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)]