In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full			Miles and the second se			
Vote Dempsey Committee						
Full Name of Contributor	Employer, Occur	pation, Labor Organization*	Registration Number, if PAC			
Brian Lovely						
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
3264 Milton Avenue	Web site d	levelopment	0 2	23	0 9	\$671.13
City	Sta te	Zip Code		ed at Fun		
Columbus	ОН	43202	OYE	S	@) NO
Full Name of Contributor	Employer, Occup		ation Nu	TO STATE OF THE PARTY OF THE PA	THE TRANSPORT OF THE PARTY OF T	
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	Sto to	7. 0-1-	Bassing	Fam	1	
City	Stal te OH	Zip Code		ed at Fun	_	•
Full Name of Contributor		pation, Labor Organization*	O YE	S ation Nur) NO
run vane or controlle.	Employer, CTT.,	Jation, Labor Organization	IN GIOLL	ttion iva.	noei, ii	PAC
Street Address	Description of Ite	em or Service	M	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Fun	draising	; Event?
	ОН		O YE		_) NO
Full Name of Contributor	Employer, Occur	pation, Labor Organization*		ation Nur		
Street Address	Description of Iter	m or Service	М	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Fund	draising	Event?
7.2	OH		O YE) NO
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registra	ition Nur	nber, it	PAC
Street Address	Description of Iter	um or Sendice	M	D	Y	Fair Market Value
	Description of item of service				1	Fall Market value
City	Sta te	Zip Code	Receive	d at Fund	draising	Event?
	OH	F	O YE		_	76
Full Name of Contributor		pation, Labor Organization*		S ition Nun) NO PAC
	-	· -	-			
Street Address	Description of Iter	m or Service	M	D	Y	Fair Market Value
					VA.61	
City	Sta te	Zip Code	Receive	d at Fund	draising	Event?
	ОН		O YE	s	C) NO
Full Name of Contributor	Employer, Occupation, Labor Organization*			ition Nun		
						. <u></u>
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
				<u> </u>		
City	Sta te	Zip Code	_	d at Fund	Iraising	Event?
Full Name of Contributor	OH Employer Occur		O YES) NO
Full Name of Contibutor	Employer, Occup	pation, Labor Organization*	Registra	ition Nun	aber, 11	PAC
Street Address	Description of Iter	m or Service	M	D	Y	Fair Market Value
					100000000000000000000000000000000000000	
City	Sta te	Zip Code	Receive	d at Func	draising	Event?
	OH		Oyes	S	C) _{NO}

^{*} 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)]