



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

F 11 N 60 111							
Full Name of Committee DOUG JOSEPH ELECTION F	JND						
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC		
DOUG JOSEPH							
Street Address	Description of Item		or Service		Date (MM/DD/YYYY)	Fair Market Value	
9250 HUGGINS LN.	LET	TER COPIES	, ENVELOPES A	09/30/2019			
City	St		Zip Code	Received at Fundraisi	ng Event?	•	
REYNOLDSBURG		он	43068	☐ Yes 🗵 No			
Full Name of Contributor			Employer, Occupati	ion, Labor Organization*	Registration Number,	if PAC	
Street Address	Desc	ription of Item or	Service		Date (MM/DD/YYYY) Fair Market Value		
City	i	State	Zip Code	Received at Fundraising Event?			
				☐ Yes ☐ No			
Full Name of Contributor		Employer, Occupation, Labor Organization* Registration Number, if PA		if PAC			
Street Address	Desc	ription of Item or	tem or Service Date (MM/DD/YYYY) Fair Market Va			Fair Market Value	
City State		State	Zip Code	Received at Fundraising Event?			
Full Name of Contributor		Employer, Occupati	tion, Labor Organization* Registration Number, if PAC		if PAC		
Street Address	Desc	ription of Item or	Service		Date (MM/DD/YYYY) Fair Market Value		
City State		State	Zip Code Received at Fundraising Event?				
				☐ Yes ☐ No			
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC			
Street Address	reet Address Description of Item or S		Service		Date (MM/DD/YYYY)	Fair Market Value	
City State		Zip Code	Received at Fundraisi	ing Event?			
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* 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)]

\$167.51	_
Page Total \$	
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