



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee							
BOARD OF EDUCATION CSD-KIMBER	RLEY M	ASON CAN	DIDATE				
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC		
ADAM PARSON			YES WE CAN				
Street Address	Descripti	scription of Item or Service			Date (MM/DD/YYYY)	Fair Market Value	
691 FREBIS AVE	LITERATURE			05/16/2019	\$83.36		
City	State		Zip Code	Received at Fundraisir	ng Event?		
COLUMBUS		OH	43206	Yes X No	es 🗵 No		
Full Name of Contributor			Employer, Occupation	n, Labor Organization*	Registration Number, i	f PAC	
Street Address	Descript	ion of Item or S	ervice		Date (MM/DD/YYYY) Fair Market Value		
City		State	Zip Code	Received at Fundralsi	ng Event?		
				☐Yes ☐.No			
ull Name of Contributor			Employer, Occupation, Labor Organization* Registration Number, if PAC			f PAC	
Street Address	Descript	ion of Item or S	ervice		Date (MM/DD/YYYY) Fair Market Value		
City	State		Zip Code	Received at Fundraisi	ing Event?		
				☐ Yes ☐ No			
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City State		State	Zip Code Received at Fundra		sing Event?		
				☐ Yes ☐ No			
Full Name of Contributor	Employer, Occupation, Labor Organization			n, Labor Organization*	Registration Number, if PAC		
Street Address	Descrip	tion of Item or S	Service		Date (MM/DD/YYYY) Fair Market Value		
City State			Zip Code	Received at Fundrais	ng Event?		
				☐ Yes ☐ No			

83.36	
Page Total \$	
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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)]