



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Citizens for Mingo				
Full Name of Contributor Michelle May		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 12283 Cleo Rd	Description of Item or Service Beverages; 9/6 Event		Date (MM/DD/YYYY) 09/06/2018	Fair Market Value 175.00
City Orient	State OH	Zip Code 43146	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor Tina Cates		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 1630 Schrock Rd	Description of Item or Service Food; 10/1 Event		Date (MM/DD/YYYY) 10/01/2018	Fair Market Value 350.00
City Columbus	State OH	Zip Code 43229	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor CORPAC		Employer, Occupation, Labor Organization*		Registration Number, if PAC CP401
Street Address 2700 Airport Dr	Description of Item or Service Food & Beverage; 10/08/Event		Date (MM/DD/YYYY) 10/08/2018	Fair Market Value 732.00
City Columbus	State OH	Zip Code 43219	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor Angie Musselman		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 6934 Rothwell St	Description of Item or Service Banners & Misc Supplies		Date (MM/DD/YYYY) 10/10/2018	Fair Market Value 200.00
City New Albany	State OH	Zip Code 43054	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		Date (MM/DD/YYYY)	Fair Market Value
City	State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> 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)]

Page Total \$ 1,457.00