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Page	1_	

## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee for Monica DeBrock  Full Name of Contributor  Monica DeBrock  Street Address  7400 E Bryden Road  City  Revnoldsburg  Full Name of Contributor  State  State  State  City  Revnoldsburg  Full Name of Contributor  State  Stat	45.00	
Full Name of Contributor  Monica DeBrock  Street Address  7400 E Bryden Road  City  Revnoldsburg  Employer, Occupation, Labor Organization   Description of Item or Service Filing Fee  Cip Code  State    Zip Code   Received at Fundraising Event?   YES   NO	45.00	
Monica DeBrock         Street Address       Description of Item or Service       M       D       Y       Fair Market Value         7400 E Brvden Road       Filing Fee       0   2   0   6   1   3         City       State       Zip Code       Received at Fundraising Event?         Revnoldsburg       O   H       43068       YES       ✓ NO	45.00	
	45.00	
7400 E Bryden Road  Filing Fee  0   2 0   6 1   3    City  State Zip Code Received at Fundraising Event?  Revnoldsburg  ∩   H   43068	45.00	
City State Zip Code Received at Fundraising Event?  Revnoldsburg   H   43068   YES   NO	45.00	
Reynoldsburg O   H 43068		
If the Internation I abor Organization * Registration Number if PAC		
Taployer, Occupation, Labor Organization (Cepstation Number, If TAC		
Street Address Description of Item or Service M D Y Fair Market Value		
City State Zip Code Received at Fundraising Event?		
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?		
YES NO		
Full Name of Contributor Employer, Occupation, Labor Organization * Registration Number, if PAC	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?  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?		
I YES TNO		
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?		
YES NO		
Full Name of Contributor Employer, Occupation, Labor Organization * Registration Number, if PAC		
Tarried of Conditions		
Street Address Description of Item or Service M D Y Fair Market Value		
City State Zip Code 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 State Zip Code Received at Fundraising Event?		
│ │ │ │ YES │ NO		

Page Total \$	45.00
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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 the 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 appear. [R.C. 3517.10(B)(4)]