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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					
	Friends of Kristin Bryant				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC		
Lisa Roberts			M D Y Fair Market Value		
Street Address	Description of Item or Service				
760 Gascony Blvd	Event Expense		Received at Fundraising Event?		
City	State	Zip Code 42049	YES NO		
Reynoldsburg	O H	43068 ation, Labor Organization *	Registration Number, if PAC		
Full Name of Contributor	Employer, Occupa	anon, Labor Organization *	Registration number, it is rec		
Bill Ratcliff	Description of Item or Service		M D Y Fair Market Value		
Street Address			05 17 15 35.00		
1100 Matterhorn Dr		ent Expense	Received at Fundraising Event?		
City	State H	Zip Code 43068	YES NO		
Reynoldsburg		ation, Labor Organization *	Registration Number, if PAC		
Full Name of Contributor	employer, Occup	ation, Labor Organization *	registration transcer, it is the		
Tim Paris	Description of Ite	m or Carrios	M D Y Fair Market Value		
Street Address	escription of the	Photos	030115 100.00		
1070 Tiffany Dr	State	Zip Code	Received at Fundraising Event?		
City	O H	43068	YES VNG		
Reynoldsburg		ation, Labor Organization *	Registration Number, if PAC		
Full Name of Contributor	Employer, Occup	ation, Later Organization	Tropics I removed to a constant of the constan		
Tina Ebright	Description of Ite	m or Service	M D Y Fair Market Value		
Street Address	Caterina		040215 75.00		
6431 Rugosa	State	Zip Code	Received at Fundraising Event?		
City Paymoldshurg	O H	43068	YES NG		
Revnoldsburg Full Name of Contributor		ation, Labor Organization *	Registration Number, if PAC		
	pioyer, occup		1		
Street Address	Description of Ite	m or Service	M D Y Fair Market Value		
Street Address 8 198 Slatt Ridge Blvo	Cate	rina	110/14/15 50.00_		
City 11	State	Zip Cod	Received at Fundraising Event?		
Reunolds huca \$	10 H	143068	YES NO		
Full Name of Contributor	Employer, Occup	nation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Ite	m or Service	M D Y Fair Market Value		
City	State	Zip Code	Received at Fundraising Event?		
			YES NO		
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registration Number, if PAC		
			<u> </u>		
Street Address	Description of Ite	em or Service	M D Y Fair Market Value		
	1				
City	State	Zip Code	Received at Fundraising Event?		
\ ^	I		YES NO		
Full Name of Contributor	Employer, Occur	pation, Labor Organization *	Registration Number, if PAC		
	1				
Street Address	Description of Item or Service		M D Y Fair Market Value		
1	l				
City	State	Zip Code	Received at Fundraising Event?		
			YES NO		

[•] 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)]