Page	2

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

N. Carlotte							
Name of Committee in Full							
CITZENS FOR ELAINE TORNERO				ii	and the second second	_	
Full Name of Contributor	Employer, Occup	Registration Number, if PAC					
ELAINE TORNERO							
Street Address	Description of Ite	M	D	Y	Fair Market Valu	e	
7716 CRITWELL COURT	WEB SITE		0 9	2 8	0 9		14.66
City	State Zip Code			Received at Fundraising Event?			
REYNOLDSBURG	\cap H	43068		YES		√NO	
Full Name of Contributor		pation, Labor Organization *	Registra		ber, if PA		
	Employer, Occup	pation, Labor Organization	Registra	don ram	.001, 11 1 1		
ELAINE TORNERO							
Street Address	Description of It	M	D	Y	Fair Market Valu	i i	
7716 CRITWELL COURT	COPIES	S & ENVELOPES	0 9				60.00
City	State	Received at Fundraising Event?					
REYNOLDSBURG	\cap \mid H	43068		YES		√ NO	
Full Name of Contributor		pation, Labor Organization *	Registra	tion Num	ber if PA	C	
	Employer, occup	pation, Euror Organization	Registration Number, if PAC OH613				
JOBS-PAC							
Street Address	Description of It	em or Service POSTAGE	M	D	i	rair Market valu	N N
6969 STONECREEK AVE. NE		0 9				252.00	
City	State	Zip Code	Receive		raising Ev		
CANTON	\cap \mid \mid	44721		YES		√ NO	
Full Name of Contributor	Employer, Occur	pation, Labor Organization *	Registra	tion Num	ber, if PA	.С	
Tun Tunio di Continuito	2			, , , , , , , , , , , , , , , , , , ,			
	Description of It	M	T D	ΙΥ	Fair Market Valu	е	
Street Address	Description of it	em or service	IVI	"	1	Tall Market Valu	·C
						<u> </u>	
City	State	Zip Code	Receive	1	raising E		
				YES		✓ NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registra	tion Nurr	ber, if PA	AC .	
		-					
Street Address	Description of Item or Service		M	D	ΙΥ	Fair Market Valu	ıe.
Sueet Address	Description of it	on or bervies	"		1		-
		Tala	- - -			<u> </u>	
City	State	Zip Code	Receive	4	Iraising E		
				YES		NO	
Full Name of Contributor	Employer, Occu	Registration Number, if PAC					
Street Address	Description of It	M	D	Y	Fair Market Valu	ie	
odeet Address	T						
~ ·	C4-4-	Tin Code	Pagaina	d at Fund	lraising E	uant?	
City	State	Zip Code	Receive	7	naising E		
				YES	***********	∐NO	
Full Name of Contributor	pation, Labor Organization *	Registra	ition Nun	iber, if PA	AC		
·			1				
Street Address	Description of Item or Service		М	D	Y	Fair Market Valu	ie
			11	1			
City	State	Zip Code	Receive	d at Func	Iraising E	vent?	
City	State	Zip Code	I CCCIVE	YES	naising L	Πno	
		Registration Number, if PAC					
Full Name of Contributor	Employer, Occupation, Labor Organization *		Kegistra	tuon Nun	noer, if Pa	40	
Street Address	Description of Item or Service		M	D	Y	Fair Market Valu	ie
City	State	Zip Code	Receive	d at Fund	iraising E	vent?	
0.09				YES	5 -	NO	
	1	1	1 —	ب د د			

Page Total \$ 326.66

^{*} 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)]