In-Kind Contributions Received

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Darra O	
Lage	

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Friends of Tina Pierce						
Full Name of Contributor William and Kerry Easton	Employer, Occupa	Registration Number, if PAC				
Street Address	Description of Item	м	D	Y	Fair Market Value	
183 Northmoor Place	Food and be	0 4	18			
City	State	Zip Code 43214	Receive	ed at Func	draising	g Event?
Columbus	OH	OYES O NO				
Full Name of Contributor	Employer, Occupa	Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Func	draisin:	Event?
•	OH	ļ ·	1_			_
Full Name of Contributor		tion, Labor Organization*	OYE			O NO
Pair Vane of Controllor	Employer, Occupa	Registration Number, if PAC				
Street Address	Description of Item	or Service	M	D	Y	Fair Market Value
City	Stal te	Zip Code	Receive	ed at Fund	Iraisinį	g Event?
	OH		OYE	s	(ON C
Full Name of Contributor	Employer, Occupa	Registration Number, if PAC				
Street Address	Description of Item	or Carries	M	TD	ان د	Fair Market Value
Succe riduless	Description of item	i di Service	"		1	rau Market value
City	Stal te	Zip Code	Receive	d at Fund	draising	Event?
	OH		OYES O NO			
Full Name of Contributor	Employer, Occupa	Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Fund	draisin	g Event?
	ОН					
Full Name of Contributor	Employer, Occupa	1 ttion, Labor Organization*	O YES O NO Registration Number, if PAC			
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Fund	draisin	Event ⁹
City	OH		1_			<u>-</u>
Fid Name of Contributor	1	ition, Labor Organization*	Pariete	S ation Nun) NO
Full Name of Contributor	Employer, Occupa	tion, Labor Organization	Kegisti	mon Nun	noer, ii	FAC
Street Address	Description of Item or Service		M	D	T	Fair Market Value
City	State OH	Zip Code	Received at Fundraising Event? OYES O NO			
Full Name of Contributor	Employer, Occupation, Labor Organization		Registration Number, if PAC			
Street Address	Description of Item	М	D	Y	Fair Market Value	
City	Starte	Zip Code	Receive	d at Fund	draisin	g Event?
	OH		OYE.	S	(O _{NO}

Page Total \$100.00

^{*} 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)]