Page fa

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Randy Reisling			. 		,			
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC				
Cathy Johnson	<u> </u>				,		12.	
Street Address	Description of Item or Service			M	D	Y	Fair Market Value	20.00
7475n Opossum Run Rd	Party Favors			0 8 2 8 1 1 20.00				
City	Sta	•	Zip Code		d at Fundi	raising Ev	[
London	0	H	43140		YES		NO	
Full Name of Contributor	Employer	, Occupa	ation, Labor Organization *	Registra	tion Num	ber, if PA	ıC.	
Kelly Reisling				1				
Street Address	Description of Item or Service			M	D	Y	Fair Market Value	44.00
3178 Ranke Ct	Stamps			0 8		1 1		44.00
City	Sta		Zip Code	Received	d at Fundi	raising Ev		
Grove City	$0 \downarrow$	Н	43123	<u> </u>	YES		√3/0	
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC							
Kelly Reisling				.	· -	1	In 122 2 2	
Street Address	1 -		m or Service	M	D	Y	Fair Market Value	20.00
3178 Ranke Ct			ng /Envelopes		0 1			20.00
City	Sta		Zip Code	Keceive	d at Fundi	raising Ev	_	
Grove City	$0 \downarrow$	H	43123		YES			
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, i				ber, if PA	AC .		
Street Address	Description of Item or Service			M	D	Ý	Fair Market Value	
			7: 0-1	1				
City	Sta	иe	Zip Code	. –	d at Funds YES	raising E	vent? NO	
Full Name of Contributor	Employer Operation Labor Operation 2			_ <u></u>				
p an vane or Controller	Employer, Occupation, Labor Organization • Registration Number, if PAC							
Street Address	Description of Item		m or Service	M	D	Y	Fair Market Value	
City	Sta	ite	Zip Code	Receive	d at Fund	raisino Fr	vent?	
					YES	. ت. وست	No	İ
Full Name of Contributor	Employer	. Occurs	ation, Labor Organization *	Registra	tion Num	ber, if PA	. 	
and the state of t		.,					-	
Street Address	Description of Item or Service		n or Service	М	D	Y	Fair Market Value	
					<u> </u>		1	
City	Sta	ite	Zip Code	Receive	d at Fund	raising E	vent?	
	<u> </u>				YES		No	
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC				
Street Address	Description of Item or Service			М	D	Y	Fair Market Value	
	<u> </u>			_			<u> </u>	
City	Sta	ite	Zip Code	Receive	d at Fund YES	raising E	vent?	
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC				
Street Address	Description of Item or Service			М	D	Y	Fair Market Value	
	<u> </u>	 	a. c. :	1 _D				
City	Sta	ite	Zip Code	Keceive	d at Fund	raising E		
	1		i	<u> </u>	YES		NO	

Page Total \$	184.00
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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)]