

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>CHRIS AMOROSE GROOMES FOR DUBLIN</b>				
Full Name of Contributor <b>CD BUTCHER</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>9882 ERIN WOODS DRIVE</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>165.00</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>1</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>MIKE CLOSE</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>7360 BELLAIRE AVE.</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>7</b>	Fair Market Value <b>175.00</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>3</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>CHRIS CLOSE</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>7360 BELLAIRE AVE.</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>7</b>	Fair Market Value <b>175.00</b>
City <b>DUBELN</b>	State <b>O</b>   <b>H</b>	Y <b>3</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>PAGE VORNBROCK</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>8963 LEA CT.</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>6</b>	Fair Market Value <b>107.60</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>1</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>CHERYL VORNBROCK</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>8963 LEA CT.</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>6</b>	Fair Market Value <b>107.60</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>1</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>ALLI CLOSE-MYERS</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>7630 BELLAIRE</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>246.00</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>2</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>RION CLOSE-MYERS</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>7630 BELLAIRE</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>246.00</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>2</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				
Full Name of Contributor <b>SUSAN SMILEY</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address <b>5598 PRESTON MILL WAY</b>	Description of Item or Service <b>FOOD &amp; BEVERAGES</b>	M <b>0</b>	D <b>6</b>	Fair Market Value <b>223.22</b>
City <b>DUBLIN</b>	State <b>O</b>   <b>H</b>	Y <b>1</b>	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Zip Code <b>43017</b>				

\* 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)]