



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee				
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Whitney Smith				
Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value	
820 Bryden Road	Graphic Design	10/31/2017	\$250.00	
City	State	Zip Code	Received at Fundraising Event?	
Columbus	OH <input checked="" type="checkbox"/>	43205	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code	Received at Fundraising Event?	
	<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code	Received at Fundraising Event?	
	<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
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Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code	Received at Fundraising Event?	
	<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	

* 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)]

Page Total \$ 250.00