



Committee Name Keep Judge Jill Flagg Lanzinger Committee		Office Sought Common Pleas Court		District Summit
Street Address 118 Clerment Ave.		City Akron	State OH	Zip 44319
Candidate Name OR PAC Registration Number Jill Flagg Lanzinger		Treasurer Name Jason Evans		Election Date (MM/DD/YYYY) 11/06/2018
<b>Type of Report (choose one):</b> <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input checked="" type="checkbox"/> Post-General				
<b>Statewide Candidates Only:</b> <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly				Year 2018
<b>Amended Report</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Termination</b> <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		<b>Short Form Report (R.C. 3517.10(H))</b> <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	1,799.96
2. Total monetary contributions (From Forms 31-A and 31-E)	3,225.00
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1, 2, 3)	5,024.96
5. Total monetary expenditures (From Forms 31-B and 31-F)	892.01
6. Balance on hand (line 4 minus line 5)	4,132.95
7. Value of in-kind contributions received (From Form 31-J-1)	10,004.48
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	
10. Outstanding debts owed by committee (From Form 31-N)	12,090.00
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

2018 DEC 13 AM 11:42

SUMMIT COUNTY  
 BOARD OF ELECTIONS  
 AKRON OHIO 44311  
 #2568 AVR

OFFICIAL COPY  
 SUMMIT COUNTY  
 BOARD OF ELECTIONS

**THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.  
 WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**

  
 Signature of Treasurer or Deputy Treasurer

12/12/2018  
 Date (MM/DD/YYYY)

Contribution Pages  
5

Expenditure Pages  
4

Other Pages  
2

Total Pages  
11



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
Full Name of Contributor Lawrence Kribs			Registration Number, if PAC	
Street Address 2845 12th Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Cuyahoga Falls	State OH	Zip Code 44223	Date (MM/DD/YYYY) 10/19/2018	Amount 25.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

\*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 also appear. [R.C. 3517.10(B)(4)]



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee			
To Whom Paid PayPal		Date (MM/DD/YYYY) 12/04/2018	Amount 5.98
Street Address 2211 North First Street		Purpose Fees	
City San Jose	State CA	Zip Code 95131	Check Number
To Whom Paid Akron Legal News		Date (MM/DD/YYYY) 12/05/2018	Amount 886.03
Street Address 60 South Summit Street		Purpose Advertisements	
City Akron	State OH	Zip Code 44308	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 892.01



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
<b>Full Name of Contributor</b> Tamara O'Brien			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1625 Orchard Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44333	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Kenneth Martin DBA			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1 Cascade Plz Ste 1000		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Kristina Fox			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2184 Dow Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Donald Hicks			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 159 S. Main St. # 423		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Mark Ludwig			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 344 Stouffer Rd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Fairlawn	<b>State</b> OH	<b>Zip Code</b> 44333	<b>Form (Cash, Check, Etc)</b> Check	

\* 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 also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 250.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
<b>Full Name of Contributor</b> Jennie Marino			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3553 Glenbrook Dr.		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 10/30/2018	<b>Amount</b> 50.00
<b>City</b> Norton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Thomas McCarty			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4728 North Ridge Drive		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 10/30/2018	<b>Amount</b> 100.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44333	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> David Bertsch			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3475 Ridgewood Rd.		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 10/30/2018	<b>Amount</b> 100.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44333	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Scot Stevenson			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 639 E. Baird		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 10/30/2018	<b>Amount</b> 100.00
<b>City</b> Barberton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Diana Stevenson			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 639 E. Baird		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 10/30/2018	<b>Amount</b> 100.00
<b>City</b> Barberton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check

\* 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 also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$450.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
<b>Full Name of Contributor</b> Kerry O'Brien			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4510 W. Bath Rd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 300.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44333	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Candace Kim-Knox			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1521 Collier Rd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 300.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44320	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Richard Cole			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1577 Raymond Ave.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 100.00				
<b>City</b> Lakemore		<b>State</b> OH	<b>Zip Code</b> 44250	<b>Form (Cash, Check, Etc)</b> Cash
<b>Full Name of Contributor</b> Mike Hoover			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 489 Crestview Ave.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 50.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44320	<b>Form (Cash, Check, Etc)</b> Cash
<b>Full Name of Contributor</b> Patricia Cosgrove			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 42 Forest Cove Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/30/2018
<b>Amount</b> 100.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Form (Cash, Check, Etc)</b> Check

\* 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 also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 850.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
Full Name of Contributor George Keith Attorneys at Law			Registration Number, if PAC	
Street Address 135 Portage Trail	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/30/2018	Amount 600.00
City Cuyahoga Falls	State OH	Zip Code 44222	Form (Cash, Check, Etc) Check	
Full Name of Contributor Mike Robinson			Registration Number, if PAC	
Street Address 3418 Squires Bend	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/30/2018	Amount 50.00
City Cuyahoga Falls	State OH	Zip Code 44223	Form (Cash, Check, Etc) PayPal	
Full Name of Contributor Carol Haines			Registration Number, if PAC	
Street Address 30 Lake Front Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/30/2018	Amount 100.00
City Akron	State OH	Zip Code 44319	Form (Cash, Check, Etc) PayPal	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/30/2018	Amount
City	State OH	Zip Code	Form (Cash, Check, Etc)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/30/2018	Amount
City	State OH	Zip Code	Form (Cash, Check, Etc)	

\* 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 also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 750.00



**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Stamps		Date (MM/DD/YYYY) Fair Market Value 10/18/2018 650.00
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Digital Advertising with Gatehouse Media		Date (MM/DD/YYYY) Fair Market Value 10/18/2018 3500.00
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Stickers for Signs		Date (MM/DD/YYYY) Fair Market Value 10/18/2018 400.50
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Stamps		Date (MM/DD/YYYY) Fair Market Value 10/22/2018 500.00
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Newspaper Ad Leader Publications		Date (MM/DD/YYYY) Fair Market Value 10/26/2018 1,079.45
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" 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)]





**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
<b>Full Name of Contributor</b> Jill Flagg Lanzinger		<b>Employer, Occupation, Labor Organization*</b> Common Pleas Judge		<b>Registration Number, if PAC</b>
<b>Street Address</b> 202 Melody Lane		<b>Description of Item or Service</b> Gatehouse Media Newspaper Ads		<b>Date (MM/DD/YYYY)</b> 11/14/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Fair Market Value</b> 196.00
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b> Jill Flagg Lanzinger		<b>Employer, Occupation, Labor Organization*</b> Common Pleas Judge		<b>Registration Number, if PAC</b>
<b>Street Address</b> 202 Melody Lane		<b>Description of Item or Service</b> Graphic Design of lit pieces		<b>Date (MM/DD/YYYY)</b> 11/14/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Fair Market Value</b> 319.50
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b> Jill Flagg Lanzinger		<b>Employer, Occupation, Labor Organization*</b> Common Pleas Judge		<b>Registration Number, if PAC</b>
<b>Street Address</b> 202 Melody Lane		<b>Description of Item or Service</b> Graphic design of billboard		<b>Date (MM/DD/YYYY)</b> 11/14/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Fair Market Value</b> 400.50
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b> Jill Flagg Lanzinger		<b>Employer, Occupation, Labor Organization*</b> Common Pleas Judge		<b>Registration Number, if PAC</b>
<b>Street Address</b> 202 Melody Lane		<b>Description of Item or Service</b> Legal Fees		<b>Date (MM/DD/YYYY)</b> 11/14/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Fair Market Value</b> 1,486.97
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b> Jill Flagg Lanzinger		<b>Employer, Occupation, Labor Organization*</b> Common Pleas Judge		<b>Registration Number, if PAC</b>
<b>Street Address</b> 202 Melody Lane		<b>Description of Item or Service</b> Polling		<b>Date (MM/DD/YYYY)</b> 12/05/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Fair Market Value</b> 1,410.00
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" 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 \$ 3518.97



**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> The Keep Judge Jill Flagg Lanzinger Committee				
Full Name of Contributor Jill Flagg Lanzinger		Employer, Occupation, Labor Organization* Common Pleas Judge		Registration Number, if PAC
Street Address 202 Melody Lane		Description of Item or Service Reimbursement		Date (MM/DD/YYYY) Fair Market Value 12/07/2018 355.56
City Akron		State OH	Zip Code 44319	Received at Fundraising Event? <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 OH	Zip Code	Received at Fundraising Event? <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 OH	Zip Code	Received at Fundraising Event? <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 OH	Zip Code	Received at Fundraising Event? <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 OH	Zip Code	Received at Fundraising Event? <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 OH	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" 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 \$ 355.56