| Page | 13 |
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In-Kind Contributions Received

Prescribed by Secretary of State 2/01

| Name of Committee in Full | | | | | | | | | |
|---|--|---|-----------------------------|-------------|---------------------------|-------------------|--------|--|--|
| Committee to Elect Donald Schonhard | t . | 1 | In | N11 '2 | DAG | | | | |
| Full Name of Contributor | Employer, Occupat | Registration l | ivumoer, it | PAC | | | | | |
| Heritage Golf Club - Dan O'Brien | <u> </u> | | NAT T | DI T | VI I | Cair Market Mai | | | |
| Street Address | Description of Item or Service | | | : 1 | Y _ | Fair Market Value | E10 40 | | |
| 3525 Heritage Club Dr. | Food & Beverage | | 0 2 2 9 1 2 510.40 | | | | | | |
| City | State | Zip Code | Received at F | _ | Event | | | | |
| Hilliard | OH | 43026 | ✓ YI | | D | ∐ NO | _ | | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization * | Registration Number, if PAC | | | | | | |
| Street Address | Description of Item | М Т | DI T | Υl | Fair Market Value | | | | |
| SU CCI ACCI CSS | - Sangkoror tem | '" ' | | 1 | | | | | |
| | State | Received at Fundraising Event? | | | | | | | |
| <u>~,</u> | 1 | Zip Code | √ YI | | | NO | | | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization * | Registration I | | PAC | | | | |
| a con a marine on Committee or | | Employer, Occupation, Laws Organization | | | regional relations in the | | | | |
| Street Address | Description of Item | Description of Item or Service | | | M D Y Fair Market Value | | | | |
| | | 1 | | | | } | | | |
| City | State | Zip Code | Received at I | Fundraising | g Event | 2 | | | |
| | | | | ES | - | □ NO | | | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization * | Registration | Number, if | PAC | _ | | | |
| | | _ | - | | | | | | |
| Street Address | Description of Item or Service | | M | Dļ | Υ | Fair Market Value | | | |
| | | | | | i | [| | | |
| City | State | Zip Code | Received at I | Fundraising | g Event' | ? | | | |
| · | 1 | \ | ☐ 17 | ES | | □ NO | | | |
| Full Name of Contributor | Employer, Occupation, Labor Organization * | | Registration Number, if PAC | | | | | | |
| | | | | | | | | | |
| Street Address | Description of Item or Service | | M | Di | Υ | Fair Market Value | | | |
| | | | | ļ | | | | | |
| City | State | Zip Code | Received at 1 | | g Event | _ | | | |
| | | | ☐ 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 | | | |
| | | | | | | | | | |
| City | State | Zip Code | Received at 1 | | gEvent | _ | | | |
| | | | | E\$ | | No | | | |
| Full Name of Contributor | Employer, Occupation, Labor Organization * | | Registration Number, if PAC | | | | | | |
| | | | | | | | | | |
| Street Address | Description of Item | or Service | M | D | Y | Fair Market Value | | | |
| | | | _ | | | | | | |
| City | State | Zip Code | Received at | | g Event | _ | | | |
| | | | | | | □ NO | | | |
| Full Name of Contributor | Employer, Occupation, Labor Organization * | | Registration Number, if PAC | | | | | | |
| | | | | | | _ | | | |
| Street Address | Description of Item | or Service | М | D | Υļ | Fair Market Value | | | |
| | | | | | ! | <u> </u> | | | |
| City | State | Zip Code | Received at | | g Event | | | | |
| | | | | ES | | □ NO | | | |
| | | | | | | | | | |

Page Total\$ 510.40

^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]