



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee STEPP FOR HILLIARD				
Full Name of Contributor OHIO REPUBLICAN PARTY		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 211 S 5 TH		Description of Item or Service DIRECT MAIL		Date (MM/DD/YYYY) 09/27/2019
City COLUMBUS		State OH <input checked="" type="checkbox"/>	Zip Code 43215	Fair Market Value 744.59 xx
Received at Fundraising Event? <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)
City		State	Zip Code	Fair Market Value
Received at Fundraising Event? <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)
City		State	Zip Code	Fair Market Value
Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No				
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Street Address		Description of Item or Service		Date (MM/DD/YYYY)
City		State	Zip Code	Fair Market Value
Received at Fundraising Event? <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 \$

744.59
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