

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE FOR THE 2014 COLUMBUS ZOO LEVY			
Full Name of Contributor THE DISPATCH PRINTING COMPANY		Employer, Occupation, Labor Organization*	
Street Address 34 SOUTH THIRD STREET		Description of Item or Service USE OF 62 E. BROAD STREET - OFFICE & PARKING - 10 WEEKS	
City COLUMBUS		State OH	Zip Code 43215
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor 555 Metro, LLC		Employer, Occupation, Labor Organization*	
Street Address 555 Metro Place, Suite 600		Description of Item or Service Use of Dublin Office Space & Parking - 37 days	
City Dublin		State OH	Zip Code 43017
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor 555 Metro, LLC		Employer, Occupation, Labor Organization*	
Street Address 555 Metro Place, Suite 600		Description of Item or Service Use of Photocopier - 37 days	
City Dublin		State OH	Zip Code 43017
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Ron Foth Advertising		Employer, Occupation, Labor Organization*	
Street Address 8100 North High Street		Description of Item or Service FILMING & EDITING OF CAMPAIGN MEDIA	
City Columbus		State OH	Zip Code 43235
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> 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)]