| 3 | 1   |    | J- | l  |     |   |
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## **In-Kind Contributions Received**

| Page |  |
|------|--|

Prescribed by Secretary of State 03/05

| Name of Committee in Full |  |                                 |
|---------------------------|--|---------------------------------|
| Qualmann for Auditor      |  |                                 |
| Full Name of Contributor  | Employer, Occupation, Labor Organization | n.* Registration Number, if PAC |
| Gary W. Qualmann          | Bexley Auditor                           | n Registration Puriod, it the   |
| •                         | Description of Item or Service           | M D Y Fair Market Value         |
| Street Address            |  |                                 |
| 173 Stanbery Avenue       | Yard Signs                               |                                 |
| City                      | State Zip Code                           | Received at Fundraising Event?  |
| Columbus                  | OH 43209                                 | OYES O 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         |
| Chy                       | State Zip Code                           | Received at Fundraising Event?  |
|                           | OH                                       | OYES ONO                        |
| Full Name of Contributor  | Employer, Occupation, Labor Organization |                                 |
|                           |  |                                 |
| Street Address            | Description of Item or Service           | M D Y Fair Market Value         |
| City                      | State Zip Code                           | Received at Fundraising Event?  |
|                           | OH                                       | OYES O NO                       |
| Full Name of Contributor  | Employer, Occupation, Labor Organization |                                 |
|                           |  |                                 |
| Street Address            | Description of Item or Service           | M D Y Fair Market Value         |
| City                      | State Zip Code                           | Received at Fundraising Event?  |
|                           | OH                                       | Oyes O 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 Fundraising Event?  |
|                           | OH_                                      | OYES ONO                        |
| 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                      | Sta te Zip Code                          | Received at Fundraising Event?  |
|                           | OH                                       | O YES O NO                      |
| Full Name of Contributor  | Employer, Occupation, Labor Organization |                                 |
| Street Address            | Description of Item or Service           | M D Y Fair Market Value         |
| City                      | State Zip Code                           | Received at Fundraising Event?  |
| ł                         | OH                                       | OYES O NO                       |
| Full Name of Contributor  | Employer, Occupation, Labor Organizati   |                                 |
| Street Address            | Description of Item or Service           | Mi D Y Fair Market Value        |
| City                      | State Zip Code                           | Received at Fundraising Event?  |
|                           | OH                                       | OYES O NO                       |

Page Total \$330.00

<sup>\*</sup> 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)]