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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				-
Committee to Elect Michael J. King				
	Employer Occur	ation I shor Organization *	Registration Number, if PAC	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Tropolation Transcer, in 1710	
Michael Squillace	Dinsmore & Shohl LLP Description of Item or Service		M D Y Fair Market Value	
Street Address	··•			7.51
175 S. Third Street, Tenth Floor	postage			7.01
City	State	Zip Code	Received at Fundraising Event?	
Columbus	O H	43215	YES VNO	
Full Name of Contributor		oation, Labor Organization *	Registration Number, if PAC	
John Jolley		ore & Shohl LLP		
Street Address	Description of Ite	em or Service	M D Y Fair Market Value	
175 S. Third Street, Tenth Floor		postage	1 0 3 1 0 7	7.51
City	State	Zip Code	Received at Fundraising Event?	
Columbus	$O \mid H$	43215	YES VO	
Full Name of Contributor	Employer, Occup	oation, Labor Organization *	Registration Number, if PAC	
Kirk Wall		ore & Shohl LLP		
Street Address	Description of Ite	em or Service	M D Y Fair Market Value	
175 S. Third Street, Tenth Floor	'	postage	1 0 3 1 0 7	7.50
City	State	Zip Code	Received at Fundraising Event?	
Columbus	lo ∐ H	43215	YES VO	
Full Name of Contributor		pation, Labor Organization *	Registration Number, if PAC	
William Mattes	Dinsmore & Shohl LLP		1	
VVIIIIaiii iViattes Street Address	Description of Ite		M D Y Fair Market Value	
	Description of ite		1 0 3 1 0 7	7.50
175 S. Third Street, Tenth Floor	State	postage Zip Code	Received at Fundraising Event?	7.00
City	TT	43215	YES VINO	
Columbus		pation, Labor Organization *	Registration Number, if PAC	
Full Name of Contributor			Regionation Number, it I AC	
Rick Lavinsky		ore & Shohl LLP	M D Y Fair Market Value	
Street Address	Description of Ite			7.50
175 S. Third Street, Tenth Floor		postage	1 0 3 1 0 7	7.50
City	State	Zip Code	Received at Fundraising Event?	
Columbus	O H	43215	U YES ✓ NO	
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registration Number, if PAC	
Marilena Walters		ore & Shohl LLP		
Street Address	Description of Ite		M D Y Fair Market Value	
175 S. Third Street, Tenth Floor		postage	1 0 3 1 0 7	7.50
City	State	Zip Code	Received at Fundraising Event?	
Columbus	$O \perp H$	43215	YES VO	
Full Name of Contributor	Employer, Occur	pation, Labor Organization *	Registration Number, if PAC	
Wayne Jenkins	Dinsm	ore & Shohl LLP		
Street Address	Description of Item or Service		M D Y Fair Market Value	
175 S. Third Street, Tenth Floor	postage		1 1 0 1 0 7	4.77
City	State	Zip Code	Received at Fundraising Event?	
Columbus	O H	43215	YES VO	
Full Name of Contributor		pation, Labor Organization *	Registration Number, if PAC	
	Dinem	ore & Shohl LLP		
Michael Squillace	Description of It	on or Service	M D Y Fair Market Value	
Street Address	Description of it			4.77
175 S. Third Street, Tenth Floor		postage	Received at Fundraising Event?	T.//
City	State H	Zip Code 43215	YES VONO	
Columbus		1 カスフリカ	I I IVES IVINO	

Page Total \$ _____54.56

^{*} 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 appear. [R.C. 3517.10(B)(4)]