



In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee						
Friends for Michael Farley Committee						
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Ohio Republican Party						
Street Address	n or Service	Service		Fair Market Value		
211 South Fifth Street	Printing and po	ostage		10/25/2017	620.25	
City	State	Zip Code	Received at Fundraisi	ng Event?		
Columbus	umbus OH		☐ Yes 🗵 No			
Full Name of Contributor		Employer, Occup	pation, Labor Organization*	or Organization* Registration Number, if PAC		
Street Address	Description of Item	n or Service		Date (MM/DD/YYYY) Fair Market Value		
City		Zip Code	Received at Fundraisi	ing Event?		
,	State		X Yes □ No	y Evolu:		
Full Name of Contributor		Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	n or Service	Date (MM/DD/YYYY)	Fair Market Value		
City	State	Zip Code	Received at Fundraisi	na Event?		
C			X Yes ☐ No	-		
Full Name of Contributor		Employer, Occup	Employer, Occupation, Labor Organization* Registration Number, if PAC		if PAC	
Street Address	Description of Item	n or Service		Date (MM/DD/YYYY) Fair Market Value		
City	State OH	Zip Code	Received at Fundraisi	ng Event?		
Full Name of Contributor		Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Iten	n or Service	Service		Fair Market Value	
City	State OH	Zip Code	Received at Fundraisi	I ng Event?		

* 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 \$	320.25		
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