| Page | 5 | _ |
|------|---|---|
| | | |

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

| Name of Committee in Full | | | | | Suggest del Sur processo de la constanción de la | | |
|-----------------------------|--|----------------------------|-----------------------------|------------|--|--|--|
| Citizens for Kristi Robbins | | | | | | | |
| Full Name of Contributor | Employer, Occupation, Labor Organization × | | Registration Number, if PAC | | | | |
| Golden Services, Inc. | | , | | | -, | | |
| Street Address | Description of Item or Service | | M | D | Y | Fair Market Value | |
| PO Box 1621 | Website Development | | 1 : | 1 9 | | 950.0 | വ |
| City | State | Zip Code | | at Fundrai | | | |
| Westerville | $ _{O} $ H | 43086 | | YES | , | √ NO | |
| Full Name of Contributor | | ion, Labor Organization × | Registrati | on Numbe | r, if PAC | | |
| Kristi Robbins | | - | | | | | |
| Street Address | Description of Item or Service | | M | D | Y | Fair Market Value | |
| 106 Bellefield Avenue | postage | | 1 0 | 2 3 | 0 9 | 35. | 20 |
| City | State | Zip Code | | at Fundrai | | | |
| Westerville | $\mid O \mid H \mid$ | 43081 | | YES | | ✓ NO | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization × | Registrati | on Numbe | r, if PAC | | end and the same |
| Kristi Robbins | | | | | | | |
| Street Address | Description of Item | or Service | М | D | Y | Fair Market Value | |
| 106 Bellefield Avenue | ink, pa | aper, envelopes | 1 0 | 0 3 | 0 9 | 47. | 12 |
| City | State | Zip Code | | at Fundrai | | ? | |
| Westerville | \mid H | 43081 | | YES | | ✓ NO | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization × | Registrati | on Numbe | r, if PAC | ik kamatang kantanantaka tanan kalancia kangala adalapah penganyan angan ana ana ana ana pangangan | Activities of the Control of the Con |
| Eric Robbins | | | | | | | |
| Street Address | Description of Item | or Service | М | D | Y | Fair Market Value | |
| 106 Bellefield Avenue | campaign postcards | | 1 0 | 0 8 | 0 9 | 2,000. | 00 |
| City . | State | Zip Code | | at Fundrai | | ? | |
| Westerville | $O \mid H$ | 43081 | | YES | | ✓ NO | |
| Full Name of Contributor | Employer, Occupat | ion, Labor Organization * | Registrat | on Numbe | r,if PAC | | |
| | | | | | | | |
| Street Address | Description of Item | or Service | M | D | Y | Fair Market Value | |
| | | | | | | | |
| City | State | Zip Code | Received | at Fundrai | ising Event | F | |
| | | | | YES | W0000000000000000000000000000000000000 | N0 | 20000000000000000000000000000000000000 |
| 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 Fundrai | ising Event | | |
| | | | | YES | | NO | |
| Full Name of Contributor | Employer, Occupat | tion, Labor Organization × | Registrat | ion Numbe | r, if PAC | | |
| | | | | · | · | | |
| Street Address | Description of Item or Service | | М | D | Y | Fair Market Value | |
| | | | | | | | |
| City | State | Zip Code | Received | at Fundra | ising Even | | |
| | | | | YES | | NO | constitution and |
| Full Name of Contributor | Employer, Occupat | tion, Labor Organization × | Registrat | ion Numbe | r, if PAC | | |
| | | | | | ·,···· | | |
| Street Address | Description of Item or Service | | М | D | Y | Fair Market Value | |
| | | | | | | | |
| City | State | Zip Code | Received | at Fundra | ising Eveni | P | |
| | | | | YES | | NO | |

^{*} 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)]