

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Bill Todd			
Full Name of Contributor Ohio Republican State & Central Executive Committee		Employer, Occupation, Labor Organization*	
Street Address 211 South Fifth St.		Description of Item or Service Video Production	
City Columbus		State OH	Zip Code 43215
		Registration Number, if PAC	
		M D Y Fair Market Value 1 0 2 5 0 7 \$82,000.00	
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Ohio Republican State & Central Executive Committee		Employer, Occupation, Labor Organization*	
Street Address 211 South Fifth St.		Description of Item or Service postage	
City Columbus		State OH	Zip Code 43215
		Registration Number, if PAC	
		M D Y Fair Market Value 1 0 3 0 0 7 \$1,550.00	
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Ohio Republican State & Central Executive Committee		Employer, Occupation, Labor Organization*	
Street Address 211 South Fifth St.		Description of Item or Service Postage	
City Columbus		State OH	Zip Code 43215
		Registration Number, if PAC	
		M D Y Fair Market Value 1 0 3 1 0 4 \$1,300.00	
		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	
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)]