1	Page	1

## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Debbie Johnson for UA Council					
Full Name of Contributor	Employer, Occup	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Debbie Johnson	1	'			
Street Address	Description of Item or Service		M D	Y Fair Market Value	
1903 Brandywine Drive	Election night party		111015	113 355.97	
City	State	Zip Code	Received at Funda		
Upper Arlington, OH 43220	$0 \mid H$	43220	YES	[V]X0	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC		
an Name of Condition()	Employer, Occupaning Laton Organization		registation (value), it is seen that		
Street Address	Description of Item or Service		MID	Y Fair Market Value	
City	State	Zip Code	Received at Funda	nising Event?	
en,	1	Lap Cocc	YES	NO NO	
C HALL CO T	r i o				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC		
Street Address	Description of Ite	om or Service	M D	Y Fair Market Value	
over ridaress	Description of the	01 501 1100			
City	State	Zip Code	Received at Funds	nicina Event?	
l l	June	Zip Code	YES	Insuing Event?	
Full Name of Contributor	F 1 0	<u> </u>			
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Num	ber, if PAC	
			1 1 1		
Street Address	Description of Ite	em or Service	MD	Y Fair Market Value	
	1			<u> </u>	
City	State	Zip Code	Received at Funda		
<u> </u>			YES	NO	
Full Name of Contributor	Employer, Occup	nation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Ite	em or Service	M D	Y Fair Market Value	
	1	• •			
City	State	Zip Code	Received at Fundi	raising Event?	
	1		YES	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	
in the read of the	- Compiler of the		1711		
City	State	Zip Code	Received at Funds	micina Event?	
cuy	State	Zip Code	YES	NO NO	
E 11 1	F 1 0:	art of table O contracts of	Registration Num		
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Num	Der, II PAC	
			<del>                                     </del>	I I I I I I I I-	
Street Address	Description of Item or Service		M   D	Y Fair Market Value	
			<u> </u>	<u> </u>	
City	State	Zip Code	Received at Funds		
	j		L YES		
Full Name of Contributor Employer, Occupation, Labor Organization * Registration Nu		Registration Num	ber, if PAC		
Street Address	Description of Item or Service		M D	Y Fair Market Value	
	1	•	+1+1		
City	State	Zip Code	Received at Fund	raising Event?	
	1		YES	∏xo	
		.i.			

Page Total \$	355.97
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<sup>\*</sup> 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)]