

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full AluttoforDublin				
Full Name of Contributor Rory Gaydos	Employer, Occupation, Labor Organization * Director of IT	Registration Number, if PAC		
Street Address 8900 Turin Hill Ct	Description of Item or Service Food for party	M 0	D 9	Fair Market Value 223.87
City Dublin	State o	Zip Code h 43017	Y 1	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor Patricia Walsh	Employer, Occupation, Labor Organization * Teacher	Registration Number, if PAC		
Street Address 813 Whitestone St	Description of Item or Service drinks for party	M 0	D 9	Fair Market Value 187.15
City Bloomington	State I	Zip Code N 47403	Y 1	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
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Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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)]