

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Dingus for Judge				
Full Name of Contributor Gary Baker		Employer, Occupation, Labor Organization * Cols School Board member		Registration Number, if PAC
Street Address 2142 Staghorn Way		Description of Item or Service Food, Drink Entertainment		M D Y Fair Market Value 0 5 3 1 0 8 100.00
City Grove City		State O	Zip Code 43123	Received at Fundraising Event? ☒ YES ☐ NO
Full Name of Contributor Diane Baker		Employer, Occupation, Labor Organization * Prof. Planning Consultants		Registration Number, if PAC
Street Address 2142 Staghorn Way		Description of Item or Service Food, Drink Entertainment		M D Y Fair Market Value 0 5 3 1 0 8 478.53
City Grove City		State O	Zip Code 43123	Received at Fundraising Event? ☒ YES ☐ NO
Full Name of Contributor Wayne Henry		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 213 Powhatan		Description of Item or Service Food, Drink Entertainment		M D Y Fair Market Value 0 9 2 6 0 8 70.77
City Columbus		State O	Zip Code 43204	Received at Fundraising Event? ☒ 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
City		State	Zip Code	Received at Fundraising Event? ☐ YES ☐ NO
Full Name of Contributor Rick Neal		Employer, Occupation, Labor Organization * Unemployed		Registration Number, if PAC
Street Address 982 Jaeger St		Description of Item or Service Food, Drink		M D Y Fair Market Value 1 0 0 7 0 8 500.00
City Columbus		State O	Zip Code 43206	Received at Fundraising Event? ☒ YES ☐ NO
Full Name of Contributor Tom Grote		Employer, Occupation, Labor Organization * Golden Light Consulting		Registration Number, if PAC
Street Address 982 Jaeger St		Description of Item or Service Food, Drink		M D Y Fair Market Value 1 0 0 7 0 8 194.06
City Columbus		State O	Zip Code 43206	Received at Fundraising Event? ☒ 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
City		State	Zip Code	Received at Fundraising Event? ☐ 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
City		State	Zip Code	Received at Fundraising Event? ☐ 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)]