



## In-Kind Contributions Received

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Victoria Newell				
Full Name of Contributor Thomas M. McCash		Employer, Occupation, Labor Organization* Attorney		Registration Number, if PAC
Street Address 6864 Fallen Timbers Drive		Description of Item or Service Web Site Set Up		Date (MM/DD/YYYY) Fair Market Value 09/23/2017 24.96
City Dublin	State OH	Zip Code 43017	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Same as above		Employer, Occupation, Labor Organization* Same		Registration Number, if PAC
Street Address Same		Description of Item or Service Social Media Ad		Date (MM/DD/YYYY) Fair Market Value 09/28/2017 2.96
City Same	State OH	Zip Code Same	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Same as above		Employer, Occupation, Labor Organization* Same		Registration Number, if PAC
Street Address Same		Description of Item or Service Social Media Ad		Date (MM/DD/YYYY) Fair Market Value 10/06/2017 15.80
City Same	State OH	Zip Code Same	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Same as above		Employer, Occupation, Labor Organization* Same		Registration Number, if PAC
Street Address Same		Description of Item or Service Social Media Ad		Date (MM/DD/YYYY) Fair Market Value 10/12/2017 25.02
City Same	State OH	Zip Code Same	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Same as above		Employer, Occupation, Labor Organization* Same		Registration Number, if PAC
Street Address Same		Description of Item or Service Social Media Ad		Date (MM/DD/YYYY) Fair Market Value 10/31/2017 36.98
City Same	State OH	Zip Code Same	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)]

Page Total \$ 105.72