In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE TO REELCT JUDG	E GILL		
Full Name of Contributor Karen Dick	Employer, Occupation. Lab	or Organization*	Registration Number, if PAC
Street Address 2001 Cardigan	Description of Item or Servi Fundraiser	ce	M D Y Fair Market Value 0 6 2 7 1 2 \$50.00
^{City} COLUMBUS	State Zip Co. OH 432		Received at Fundraising Event? OYES NO
Full Name of Contributor Collette Compton	Employer, Occupation, Lab	or Organization*	Registration Number, if PAC
Street Address 485 S. Parkview Ave	Description of Item or Servi Fundraiser	ce	M D Y Fair Market Value 0 6 2 7 1 2 \$49.00
City Bexley	Starte Zip Co OH 4320		Received at Fundraising Event? O YES NO
Full Name of Contributor	Employer, Occupation, Lab	or Organization*	Registration Number, if PAC
Street Address	Description of Item or Servi	ce	M D Y Fair Market Value
City	Stalte Zip Co	de	Received at Fundraising Event? OYES NO
Full Name of Contributor	Employer, Occupation, Lab	or Organization*	Registration Number, if PAC
Street Address	Description of Item or Servi	ce	M D Y Fair Market Value
City	State Zip Co OH	de	Received at Fundraising Event? OYES NO
Full Name of Contributor	*Employer, Occupation, Lab	or Organization*	Registration Number, if PAC
Street Address	Description of Item or Servi	ce	M D Y Fair Market Value
City	Starte OH	de	Received at Fundraising Event? OYES NO
Full Name of Contributor	Employer, Occupation, Lab	or Organization*	Registration Number, if PAC
Street Address	Description of Item or Servi	ce	M D Y Fair Market Value
City	Stal te Zip Co	de	Received at Fundraising Event? O YES NO
Full Name of Contributor	Employer, Occupation, Lab	Employer, Occupation, Labor Organization* Registration Number, if PAC	
Street Address	Description of Item or Servi	ce	M D Y Fair Market Value
City	Stalte Zip Co	de	Received at Fundraising Event? OYES O NO
Full Name of Contributor	Employer, Occupation, Lab	Employer, Occupation, Labor Organization* Registration Number, if PAC	
Street Address	Description of Item or Servi	ice	M D Y Fair Market Value
City	State Zip Co	kte	Received at Fundraising Event?

^{*} 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)]