

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full JUDGE COCROFT COMMITTEE			
Full Name of Contributor KEGLER BROWN HILL & RITTER		Employer, Occupation, Labor Organization*	
Street Address 65 E. STATE STREET		Description of Item or Service RECEPTION EXPS	
City COLUMBUS		State OH	Zip Code 43215
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value \$28.37			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State OH	Zip Code
Registration Number, if PAC		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Fair Market Value			

* 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)]