In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children			•		
Full Name of Contributor Ted's Montana Grill	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address				T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
	Description of Item or Service		M	! 1	
191 West Nationwide Blvd	Gift card	Livi a	0 9 0		
City	Stal te	Zip Code	Received at I	undraising Event?	
Columbus	OH 43215		O YES O NO		
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of It	Description of Item or Service		Y Fair Market Value	
City	Sta te	Zip Code	Received at F	undraising Event?	
	OH		OYES	O ×0	
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of la	em or Service	M D	Y Fair Market Value	
City	State OH	Zip Code	Received at I	fundraising Event?	
Full Name of Contributor	Employ er, Occu	pation, Labor Organization*		Number, if PAC	
Street Address	Description of la	em or Service	M D	Y Fair Market Value	
City	State OH	Zip Code	Received at Fundraising Event? O VES O NO		
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Its	em or Service	M D	Y Fair Market Value	
City	Sta te	Zip Code	Received at I	undraising Event?	
	OH	OH		Oyes Ono	
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of It	em or Service	M D	Y Fair Market Value	
City	Stal te OH	Zip Code	Received at F	undraising Event?	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Description of Its	Description of Item or Service		Y Fair Market Value	
City	Stalte OH	Zip Code	Received at I	Fundraising Event?	
Full Name of Contributor		Employer, Occupation, Labor Organization		Registration Number, if PAC	
Street Address	Description of la	Description of Item or Service		Y Fair Market Value	
City	Sta te OH	Zip Code	Received at I	undraising Event? O NO	

Page Total \$50.00

^{*} 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)]