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## **In-Kind Contributions Received**

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Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full  Bridges for of Full Name of Contributor  Robert A Willams  Street Address  47940 US Highway 20  City  OBerlin  Full Name of Contributor	oHin		
Eull Name of Contributor	Employer Occur	pation, Labor Organization*	Registration Number, if PAC
ROBERT A WILLIAMS	Employer, Occup		Registration Number, 11770
Street Address 47940 US HIGHWAY 20	Description of Ite	m or Service	My D 2 1 1 Fair Market Values
City	Sta te	m or Service  0 519N5  Zip Code  44074	Received at Fundraising Event?
Full Name of Contributor	Employer, Occur	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	nn or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
			☐ YES ☐ NO
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, it PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?  VES NO
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
			☐ YES ☐ NO
Full Name of Contributor	Employer, Occur	easion, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	on or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor	Émployer, Occup	oation, Labor Organization*	Registration Number, if PAC
	1		
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?  LJ YES LJ NO

Page Total \$ 292.95

<sup>\*</sup> 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)]