In-Kind Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full Full Name of Contributor Full Name of Contributor Full Name of Contributor Full Name of Myhcl Registration Number, if PAC Full Name of Contributor Full Name of Contrib			
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Ian Myhol			
Street Address 325 Medick Way	Poschasca		M 0 9 1 4 1 7 Fair Market Value 32.25
Street Address 325 Medick Way City Worthington	Sta te	Zip Code 43085	Received at Fundraising Event? L YES INO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item	or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? YES
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item	or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item	or Service	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event? I YES INO

* 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 \$ 32,25