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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
David Specht	Employer, Occupation, Labor Organization			registation Number, if 1770			
Street Address	Description of Item or Service			D	Y	Fair Market Value	
5550 Schrock Road	In-Kind Contributions		М 017	$1\overline{1}$		144.38	
City	State Zip Code			Received at Fundraising Event?			
Columbus	OH 43209			YES NO			
Full Name of Contributor	Employer, Occup	Registration Number, if PAC					
	Employer, Goodpaness, Europ Crigametrion						
Street Address	Description of Ite	em or Service	M	D	Y	Fair Market Value	
City	State	Zip Code	Received	i I at Fund	raising Ev	vent?	
				YES	-	NO	
Full Name of Contributor	Employer, Occup	Registration Number, if PAC					
Street Address	Description of Ite	em or Service	M	Ď	Y	Fair Market Value	
City	State	Zip Code	Receive	lat Fund	raising Ev	ent?	
Cary	State	Zip Code	The control	YES	rarsing i.	No	
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC						
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
City	State	Zip Code	Received	l at Fund	raising Ev	ant?	
		12.15 Code		YES	inising is	Пхо	
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	
			1				
City ·	State	Zip Code	Receiver	at Fund	raising Ev	vent ⁹	
				YES		N0	
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
						T	
Street Address	Description of Item or Service		M	D 	Y 	Fair Market Value	
City	State	Zip Code	Received	l at Fund	raising Ev	/ent?	
	1			YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
Street Address	Description of Ite	em or Service	М	D	Y	Fair Market Value	
	·						
City	State	Zip Code	Received	at Fund	raising Ev	vent?	
				YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
City	State	Zip Code	Received	l at Fund	raising Ev	/ent?	
·		,		YES		No	

Page Total \$	144.38

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the 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 appear. [R.C. 3517.10(B)(4)]