31	-	J-1	
R	r	3517	10

In-Kind Contributions Received

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Page	<u> </u>

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Committee To Re-elect Judge Maynard			
Full Name of Contributor	I II Company Comme	action Lubra Occamination	Registration Number, if PAC
Bob Krapenc	Employer, Occupation, Labor Organization*		Registration Number, 11 FAC
·			
Street Address	Description of Ite		M D Y Fair Market Value
601High St	_1	ip for fund raiser Jimmy v	0 8 1 6 1 1 \$157.65
City	Sta te	Zip Code	Received at Fundraising Event?
Worthington	OH	43085	O YES O NO
Full Name of Contributor	Employer, Occup	oation, Labor Organization*	Registration Number, if PAC
Wiley Bates			
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
2479 Koebel Rd	Print Cartridge		1 0 1 2 1 1 \$34.15
City	State	Zip Code	Received at Fundraising Event?
Columbus	ОН	43207	OYES ONO
Full Name of Contributor		pation, Labor Organization*	Registration Number, if PAC
This Name of Conditional	Employer, Occup	Janon, Davor Organization	The state of the s
0	Dii		M D Y Fair Market Value
Street Address	Description of Ite	m or Service	lan Market value
City	Sta te	Zip Code	Received at Fundraising Event?
	ОН		O YES O 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?
	OH		OYES O NO
Full Name of Contributor	Employer, Occur	pation, 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?
	ОН	'	
Full Name of Contributor		pation, Labor Organization*	Registration Number, if PAC
Pull Name of Conditionol	Employer, Geeu,	pation, battor organismitori	100
g	Description of Ite	un or Corrigo	M D Y Fair Market Value
Street Address	Description of the	an of Service	
		In a i	
City	Stal te OH	Zip Code	Received at Fundraising Event?
			O YES O NO
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number, if PAC
	Description of Ite	em or Service	M D Y Fair Market Value
Street Address			
Street Address			
Street Address City	. Sta te	Zip Code	Received at Fundraising Event?
	Stal te	Zip Code	
	OH	Zip Code	
City	OH		OYES O NO
City Full Name of Contributor	OH	pation, Labor Organization*	OYES O NO
City	OH Employer, Occu	pation, Labor Organization*	O YES O NO Registration Number, if PAC
City Full Name of Contributor Street Address	OH Employer, Occu Description of Ite	pation, Labor Organization* cm or Service	O YES O NO Registration Number, if PAC
City Full Name of Contributor	OH Employer, Occu	pation, Labor Organization*	PYES NO Registration Number, if PAC M 1) Y Fair Market Value

Page Total \$191.80

^{*} 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)]