In-Kind Contributions Received

	2	
Page	J	
1 agr		

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Committee for Richard Donovan			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Richard Lawrence Donovan	ļ .		
Street Address	Description of Item or Service	M D Y Fair Market Value	
7502 Lismore Drive	Postage	0 8 1 6 1 1 \$1.08	
City	State Zip Code Received at Fundraising Event?		
Reynoldsburg	OH 43068	OYES O 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	
5.144 , 7.144, 144			
City	State Zip Code	Received at Fundraising Event?	
!	он !		
Full Name of Contributor	Employer, Occupation, Labor Organization	YES NO Registration Number, if PAC	
run Name of Contributor	Linployer, occupation, 2250 organization	1120	
0	Description of Item or Service	M D Y Fair Market Value	
Street Address	Description of Rent of Service		
	17:0-1	Passing of Europeaning Europt?	
City	Sta te Zip Code OH	Received at Fundraising Event?	
		O YES O 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	State Zip Code	Received at Fundraising Event?	
	OH	OYES O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
İ			
Street Address	Description of Item or Service	M D Y Fair Market Value	
City	State Zip Code	Received at Fundraising Event?	
	OH	OYES ONO	
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	
Succi Address	1		
G.	State Zip Code	Received at Fundraising Event?	
City	OH	.]	
	Employer, Occupation, Labor Organization*	O YES O NO Registration Number, if PAC	
Full Name of Contributor	Employer, Occupation, Later Organization		
	Description of Item or Service	M D Y Fair Market Value	
Street Address	Description of feat of Service		
		Received at Fundraising Event?	
City	Sta te Zip Code	_ 1	
	OH	OYES ONO	
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	State Zip Code	Received at Fundmissing Event?	
1	OH	OYES O NO	
1			

* 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

\$1.08