## **In-Kind Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full					
Committee 4 Children			1	N. J. COLO	
Full Name of Contributor  Robert Michel	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Robert Michel	Dogovirties	Lor Service	M	D Y Fair Market Value	
Street Address	Description of Item or Service Silent Auction Item			2 9 0 9 \$500.00	
1552 Cobblegate Lane	1			at Fundraising Event?	
City  Povpoldshurg	Stal te OH	Zip Code 43068		-	
Reynoldsburg		ation, Labor Organization*	YES Registrati	ion Number, if PAC	
Full Name of Contributor In-Kind Contributions Received at Fund-raising Event \$250 or less	Employer, Occupation, Easter Organization		rogional.	and the second s	
Street Address	Description of Item or Service		0 4	D Y Fair Market Value 2 9 0 9 \$944.00	
City	Sta te OH	Zip Code	Received O YES	at Fundraising Event?	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item or Service		M	D Y Fair Market Value	
City	Sta te OH	Zip Code	O YES		
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC		
Street Address	Description of Iten	n or Service	М	D Y Fair Market Value	
City	Sta te OH	Zip Code	Received at Fundraising Event?  O 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	Stal te	Zip Code	Received	at Fundraising Event?	
	OH		O YES O NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Description of Iten	n or Service	М	D Y Fair Market Value	
City	Stal te OH	Zip Code	Received YES	at Fundraising Event?	
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	Stal te Zip Code		Received	Received at Fundraising Event?  OYES  NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Description of Iten		M	D Y Fair Market Value	
City	Stal te	Zip Code	Received	d at Fundraising Event?  NO	

<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)]