



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Committee to Elect Victoria Newell				
Full Name of Contributor Thomas M. McCash		Employer, Occupation, Labor Organization* Attorney		Registration Number, if PAC
Street Address 6864 Fallen Timbers Drive		Description of Item or Service Social Media Ad		Date (MM/DD/YYYY) Fair Market Value 11/06/2017 22.93
City Dublin	State OH	Zip Code 43017	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Deborah Mitchell		Employer, Occupation, Labor Organization* Fisher College Of Business		Registration Number, if PAC
Street Address 178 Longview Dr.		Description of Item or Service Web Site Interview Video		Date (MM/DD/YYYY) Fair Market Value 10/25/2017 150.00
City Dublin	State OH	Zip Code 43017	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Victoria L. Newell		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 6864 Fallen Timbers Dr		Description of Item or Service Forgiveness of Debt Owed		Date (MM/DD/YYYY) Fair Market Value 01/31/2017 4000.19
City Dublin	State OH	Zip Code 43017	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		Date (MM/DD/YYYY) Fair Market Value
City	State OH	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		Date (MM/DD/YYYY) Fair Market Value
City	State OH	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

* 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)]