In-Kind Contributions Received



Prescribed by Secretary of State 03/05

| Name of Committee in Full COMMITTEE FOR THE 2014 COLUMBUS ZOO LEVY | | | |
|--|--|---------------------------|--|
| Full Name of Contributor THE DISPATCH PRINTING COMPANY | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| 34 SOUTH THIRD STREET | USE OF BY E. BROAD STREET - OFFICE & PARKING - 3 WEEKS | | 0 5 0 6 1 4 \$1,887.30 |
| City COLUMBUS | OH State | Zip Code 43215 | Received at Fundraising Event? O YES O NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| 555 Metro, LLC | İ | | i l |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| 555 Metro Place, Suite 600 | Use of Dublin Office Space & Parking - 20 DAYS | | 0 5 0 6 1 4 \$493.15 |
| City | Sta te | Zip Code | Received at Fundraising Event? |
| Dublin | ОН | 43017 | OYES ONO |
| Full Name of Contributor | Employer, Occupa | tion, Labor Organization* | Registration Number, if PAC |
| 555 Metro, LLC | ' - ' ' | | |
| Street Address | Description of Item | or Service | M D Y Fair Market Value |
| 555 Metro Place, Suite 600 | 1 | tocopier - 20 DAYS | M D Y Fair Market Value 0 5 0 6 1 4 \$230.14 |
| City | State | Zip Code | Received at Fundraising Event? |
| Dublin | OH | 43017 | |
| Full Name of Contributor | | | Registration Number, if PAC |
| | Employer, Occupa | tion, Labor Organization* | Registration Number, it FAC |
| Street Address | Description of Item | or Service | M D Y Fair Market Value |
| City | Stal te | Zip Code | 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 | Sta te | Zip Code | Received at Fundraising Event? |
| | | | 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 | Starte OH | Zip Code | 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 | Stal te OH | Zip Code | 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 OH | Zip Code | Received at Fundraising Event? OYES O NO |

Page Total \$2,610.59

^{*} 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)]