31-J-1 R.C. 3517.10

FOR PAPER FILING ONLY In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

		·				
Name of Committee in Full Committee for Judge O'Donnell						
Full Name of Contributor	Employer Occupa	ation, Labor Organization*	Registro	tion Nu	nber if	PAC
Jeremy M. Dodgion	self/Jere	Registra	aion ivui	noci, ii	rac	
Street Address	Description of Iten	M	D	Y	Fair Market Value	
1188 South High St.	food & beverages			1	16	
City Columbus	Stal te OH	Zip Code 43206	Receive YE		-) NO
Full Name of Contributor	Employer, Occupa	ntion, Labor Organization*	Registra	tion Nu	nber, if	PAC
Megan E. Grant	Albeit Weiker LLP/attorney			· · · · · · · · · · · · · · · · · · ·	1 52	
Street Address	Description of Item or Service		M] P	Y	Fair Market Value
250 E. Broad St.	food & beverages		10	1 1	16	4
City	Sta te	Zip Code	Receive	d at Fun	draising	Event?
Columbus	OH	43215	⊙ YE	s	() NO
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Item	n or Service	M D Y Fair Market Value			
City	State OH	Zip Code	Receive O YE	dat Fun	_	Event?
Full Name of Contributor		ation, Labor Organization*		ation Nu		
To the team of controlled			- Coground			
Street Address	Description of Iten	n or Service	M	D	Y	Fair Market Value
City	Staj te OH	Zip Code	Received at Fundraising Event? O YES NO			
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Iter	n or Service	M D Y Fair Market Value			
City	Sta te	Zip Code	Receive	d at Fun	draising	Event?
	OH		OYES ONO			
Full Name of Contributor	Employer, Occup	ation, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Iter	n or Service	M. D Y Fair Market Value			
City	Sta te OH	Zip Code	Receive		_	_
		<u> </u>	O YE		_) NO
Full Name of Contributor	Employer, Occup	ation, Labor Organization*	Registra	ation Nu	mber, if	PAC
Street Address	Description of Item or Service		M	D	M	Fair Market Value
City	State OH	Zip Code	Receive O YE	ed at Fun		Event?
Full Name of Contributor	Employer, Occup	ation, Labor Organization*		ation Nu	mber, if	PAC
Street Address	Description of Iter	n or Service	M D Y Fair Market Value			
City	Sta te OH	Zip Code	Receive			Event?

^{*} 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)]