In-Kind Contributions Received

Page _____

Prescribed by Secretary of State 03/05

| Name of Committee in Full Committee for Judge O'Donnell | | | |
|--|---|----------------------------|--|
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Colleen O'Donnell | Franklin County | | |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| 345 South High St. | Food & Beverages for 1/29 fund raiser | | 0 4 2 8 1 4 \$997.55 |
| City | Sta te | Zip Code | Received at Fundraising Event? |
| Columbus | OH | 43215 | • YES O NO |
| Full Name of Contributor | | ation, Labor Organization* | Registration Number, if PAC |
| Amy Davis | 1 | ations LLC | |
| Street Address | Description of Item or Service | | M D Y Fair Market Value 0 4 8 0 1 4 \$473.03 |
| 279 E. Beck St. | food for 2/2 | 27 fund raiser | |
| City | Sta te | Zip Code | Received at Fundraising Event? |
| Columbus | ОН | 43206 | OYES ONO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Brian Joslyn | self/Joslyn Law Firm/attorn | | 1 |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| 901 S. High St. | food & Bever | age for 5/15 fund raiser | 0 5 1 5 1 4 \$600.00 |
| Сіту | Sta te | Zip Code | Received at Fundraising Event? |
| Columbus | ОН | 43296 | OYES O NO |
| Full Name of Contributor | | ation, Labor Organization* | Registration Number, if PAC |
| David Watson | self/Watson Law Group/atto | | |
| Street Address | Description of Item or Service | | M D Y Fair Market Value |
| 503 S. Front St., Ste. 250 | food & beverages for 5/29 fund raiser | | 0 5 2 9 1 4 \$289.95 |
| City | Sta te | Zip Code | Received at Fundraising Event? |
| Columbus | OH | 43215 | 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 | Sta te | Zip Code | Received at Fundraising Event? |
| | OH | | Oyes Ono |
| Full Name of Contributor | Employer, Occupa | ation, 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? |
| | OH | | 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 tc | Zip Code | Received at Fundraising Event? |
| | ОН | | OYES O NO |
| Full Name of Contributor | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Charles A Marine | Description of Item or Service | | M D Y Fair Market Value |
| Street Address | | it of Service | |
| City | Sta te OH | Zip Code | Received at Fundraising Event? OVES ONO |

^{*} 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)]