

FOR PAPER FILING ONLY

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Judge O'Donnell												
Full Name of Contributor Woody Fox		Employer, Occupation, Labor Organization* Woody Fox Bail Bonds		Registration Number, if PAC								
Street Address 233 N. Bend Dr.		Description of Item or Service Food & beverage		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>1</td><td>2</td><td>1 1 6 107.50</td> </tr> </table>	M	D	Y	Fair Market Value	0	1	2	1 1 6 107.50
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0	1	2	1 1 6 107.50									
City Pataskala		State OH	Zip Code 43062	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO								
Full Name of Contributor Steven Larson		Employer, Occupation, Labor Organization* self/Steven Larson, Attorne		Registration Number, if PAC								
Street Address 283 S. Third St.		Description of Item or Service Food & beverage		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>1</td><td>2</td><td>1 1 6 107.50</td> </tr> </table>	M	D	Y	Fair Market Value	0	1	2	1 1 6 107.50
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* 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)]