

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee FRIENDS OF RHINE McLIN						Registration Number, if PAC	
Full Name of Candidate MAYOR RHINE L. McLIN							
Street Address 1130 GERMANTOWN ST.				Office Sought		District	
City DAYTON				State OH		Zip Code 45408	
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General	<input type="checkbox"/> Post-General	<input type="checkbox"/> Annual Year		
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> Termination	<input type="checkbox"/> Semiannual		
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Election		M	D Y

For candidates only, during an election year: If total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box ☐ No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	\$42429.66
2. Total monetary contributions (From Form No. 31-A)	\$	\$15269.00
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	\$57698.66
5. Total monetary expenditures (From Form No. 31-B)	\$	\$35002.76
6. Balance on hand (line 4 minus line 5)	\$	\$22695.90
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	\$58888.92
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	
12. Value of independent expenditures made (From Form No. 31-U)	\$	
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	\$542.86

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THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

JOYCE HARRIS
Print Name and Title (Treasurer and Deputy Treasurer only)

Joyce Harris
Signature

12/11/09
Date

Contribution
pages _____

Expenditure
pages _____

Other
pages _____

Total
pages 1

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full FRIENDS OF RHINE McLIN							
Full Name of Contributor SQUIRE SANDERS & DEMPSEY L.L.P. PAC						Registration Number, if PAC COO444935	
Street Address 1201 PENNSYLVANIA AVENUE NW			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WASHINGTON		State DC	Zip Code 20004	M 1	D 0	Y 9	Amount 250.00
Full Name of Contributor JOAN MANTIL						Registration Number, if PAC	
Street Address 6040 MAD RIVER RD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45459	M 1	D 0	Y 9	Amount 561.00
Full Name of Contributor RICHARD A. CARNE						Registration Number, if PAC	
Street Address 6020 BRIGANTINE WAY			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45414-6913	M 1	D 0	Y 9	Amount 250.00
Full Name of Contributor STEVEN P. HARSMAN						Registration Number, if PAC	
Street Address 1432 SAGRAVES DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City VANDALIA		State OH	Zip Code 45377	M 0	D 9	Y 9	Amount 100.00
Full Name of Contributor THOMAS J. BECKER						Registration Number, if PAC	
Street Address 648 MURRELL DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City KETTERING		State OH	Zip Code 45429	M 1	D 0	Y 9	Amount 125.00
Full Name of Contributor MARK J. MEISTER						Registration Number, if PAC	
Street Address 150 E. LIMESTONE ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City YELLOW SPRINGS		State OH	Zip Code 45387	M 1	D 0	Y 9	Amount 50.00
Full Name of Contributor ALMA M. LONG						Registration Number, if PAC	
Street Address 629 WILLOW SPRINGS DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45427	M 1	D 0	Y 9	Amount 25.00
Full Name of Contributor NATIONAL CITY CORPORATION PAC						Registration Number, if PAC LOC. #01-2157	
Street Address 1900 EAST NINTH ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City CLEVELAND		State OH	Zip Code 44114	M 1	D 0	Y 9	Amount 561.00

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the 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)]

Page Total

1922.00

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Name of Committee in Full FRIENDS OF RHINE McLIN							
Full Name of Contributor JOEL M. FRYDMAN						Registration Number, if PAC	
Street Address 520 MAYSFIELD RD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45419	M 1	D 0	Y 5 0 9	Amount 100.00
Full Name of Contributor SCHENECTADY FIRST FUND(HON.BRIAN STRATTON)						Registration Number, if PAC	
Street Address 729 DECAMP AVE.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City SCHENECTADY		State NY	Zip Code 12309	M 1	D 0	Y 3 0 9	Amount 500.00
Full Name of Contributor LINDA M. FISCHBACH						Registration Number, if PAC	
Street Address 822 BROADMOOR DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45419-2004	M 1	D 0	Y 1 4 0 9	Amount 25.00
Full Name of Contributor NANCY E. ANDERSON						Registration Number, if PAC	
Street Address 410 S. PLUM ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City TROY		State OH	Zip Code 45373	M 1	D 0	Y 1 6 0 9	Amount 61.00
Full Name of Contributor FARLEY C. FRDYMAN						Registration Number, if PAC	
Street Address 7130 DOMINICAN DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45415-1205	M 1	D 0	Y 1 7 0 9	Amount 100.00
Full Name of Contributor MARVIN DALE						Registration Number, if PAC	
Street Address 7057 PINEVIEW DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City HUBER HEIGHTS		State OH	Zip Code 45424	M 1	D 0	Y 1 5 0 9	Amount 100.00
Full Name of Contributor CNCZ (NAME UNKNOWN) PAC						Registration Number, if PAC 318	
Street Address 15 W. FOURTH ST. SUITE 100			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45402-1403	M 1	D 0	Y 2 2 0 9	Amount 2500.00
Full Name of Contributor TIMOTHY N. O' CONNELL						Registration Number, if PAC	
Street Address 2620 WESTFIELD AVE.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45420	M 1	D 0	Y 2 1 0 9	Amount 100.00

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Statement of Contributions Received

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Name of Committee in Full FRIENDS OF RHINE McLIN							
Full Name of Contributor J. MICHAEL HERR						Registration Number, if PAC	
Street Address 114 RUE MARSEILLE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City KETTERING		State OH	Zip Code 45429	M 1	D 0	Y 2	Amount 100.00
Full Name of Contributor ALLEN F. PIPPENGER						Registration Number, if PAC	
Street Address 208 WEST WOODBURY			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45416	M 1	D 0	Y 2	Amount 100.00
Full Name of Contributor JOSEPH LITVIN						Registration Number, if PAC	
Street Address 6430 MORANDA DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45416-2020	M 1	D 0	Y 2	Amount 50.00
Full Name of Contributor RONALD F. BUDZINK						Registration Number, if PAC	
Street Address 7385 CADES COVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City CENTERVILLE		State OH	Zip Code 45459	M 1	D 0	Y 2	Amount 250.00
Full Name of Contributor LUCELLE FLEMING						Registration Number, if PAC	
Street Address 1000 URLIN AVE. UNIT 1522			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OH	Zip Code 43212	M 1	D 0	Y 2	Amount 200.00
Full Name of Contributor CARESOURCE MANAGEMENT SERVICES CO.						Registration Number, if PAC 11-10133	
Street Address ONE DAYTON CENTER 1 S. MAIN ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45402	M 1	D 0	Y 2	Amount 500.00
Full Name of Contributor MARY A. MATHILE						Registration Number, if PAC 011293	
Street Address 6450 SANDLAKE RD. SUITE 200			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City 45414-2635		State OH	Zip Code	M 1	D 0	Y 2	Amount 5000.00
Full Name of Contributor THOMAS W. LOVETT						Registration Number, if PAC	
Street Address 555 RUBICON RD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45419	M 1	D 0	Y 3	Amount 500.00

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Name of Committee in Full FRIENDS OF RHINE McLIN							
Full Name of Contributor ARTHUR G. MEYER A.A.L.						Registration Number, if PAC	
Street Address 550 BRASSFIELD CIR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45459	M 1	D 0	Y 2	Amount 500.00
Full Name of Contributor ELEANOR STOCKS						Registration Number, if PAC	
Street Address 3116 S. DIXIE DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45400-1964	M 1	D 0	Y 3	Amount 100.00
Full Name of Contributor BOICH LAW OFFICE, LLC						Registration Number, if PAC	
Street Address 750 CROSS POINTE RD. SUITE 3			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GAHANNA		State OH	Zip Code 43220	M 1	D 1	Y 0	Amount 1000.00
Full Name of Contributor KENNETH A. LONG						Registration Number, if PAC	
Street Address 11707 GREAT OWL CIR			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City RESTON		State VA	Zip Code 20184	M 1	D 0	Y 1	Amount 61.00
Full Name of Contributor LAURA M. LANSDOWN						Registration Number, if PAC	
Street Address 7375 DAYTON FARMERSVILLE RD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45418	M 1	D 0	Y 2	Amount 50.00
Full Name of Contributor KURT T. STANIC						Registration Number, if PAC	
Street Address 330 W. FIRST ST APT. 901			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45402	M 1	D 0	Y 2	Amount 250.00
Full Name of Contributor FOLEY FOR COMMISSION						Registration Number, if PAC	
Street Address 5 W. WENGER RD. STE. F			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City ENGLEWOOD		State OH	Zip Code 45322-2723	M 1	D 0	Y 2	Amount 250.00
Full Name of Contributor WESTREN OHIO ELCTRO PAC						Registration Number, if PAC	
Street Address 2210 ARBOR BLVD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45439	M 1	D 0	Y 2	Amount 100.00

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Name of Committee in Full FRIENDS OF RHINE McLIN							
Full Name of Contributor SYLVIA WINCE						Registration Number, if PAC	
Street Address 771 BRITTON AVE.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45429	M 1	D 1	Y 0	Amount 25.00
Full Name of Contributor LABORERS LOCAL # 1410 POLITICAL						Registration Number, if PAC 55011078	
Street Address 2226 E. THIRD ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45403	M 1	D 1	Y 0	Amount 250.00
Full Name of Contributor PATRICIA HICKS-SMITH						Registration Number, if PAC	
Street Address 2721 GREENBRIER DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45406	M 1	D 0	Y 2	Amount 250.00
Full Name of Contributor JOANN I BLACK						Registration Number, if PAC	
Street Address 16317 SW 14TH AVENUE ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City OCALA		State FL	Zip Code	M 1	D 0	Y 2	Amount 25.00
Full Name of Contributor IRONWORKERS LOCAL 290						Registration Number, if PAC 290 P.C.E.	
Street Address 606 HIKKROSE AVE.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DAYTON		State OH	Zip Code 45404	M 1	D 0	Y 2	Amount 250.00
Full Name of Contributor RUBEN PAYNE						Registration Number, if PAC	
Street Address 5943 LYNNWAY DR.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City DAYTON		State OH	Zip Code 45415	M 1	D 0	Y 2	Amount 50.00
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State OH	Zip Code	M	D	Y	Amount

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Statement of Expenditures

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Name of Committee in Full FRIENDS OF RHINE McLIN									
To Whom Paid JAYS SEAFOOD						M	D	Y	Amount
						1	0	0	909.00
Address 225 E. SIXTH ST.						Purpose FOOD FOR CAMPAIGN PARTY			
City DAYTON		State OH		Zip Code 45402		Check Number 2208			
To Whom Paid WDAO RADIO 1210AM						M	D	Y	Amount
						1	0	0	1856.40
Address 1012 W. THIRD ST.						Purpose RADIO SPEECH			
City DAYTON		State OH		Zip Code 45402		Check Number 2222			
To Whom Paid WROU FM						M	D	Y	Amount
						1	0	0	1525.00
Address 717 E. DAVID RD.						Purpose RADIO SPEECH			
City DAYTON		State OH		Zip Code 45429		Check Number 2223			
To Whom Paid OHIO DEMOCRATIC PARTY						M	D	Y	Amount
						1	0	0	14219.30
Address 340 E. FULTON ST.						Purpose MAILINGS			
City COLUMBUS		State OH		Zip Code 43215		Check Number 2224			
To Whom Paid OHIO DEMOCRATIC PARTY						M	D	Y	Amount
						1	0	0	6956.61
Address 340 E. FULTON ST.						Purpose MAILINGS			
City COLUMBUS		State OH		Zip Code 43215		Check Number 2225			
To Whom Paid CITIZENS FOR GOOD LIBRARIES						M	D	Y	Amount
						1	0	0	150.00
Address 184 SALEM AVE.						Purpose DONATION			
City DAYTON		State OH		Zip Code 45406		Check Number 2226			
To Whom Paid FIVE RIVERS LEVY COMMITTEE						M	D	Y	Amount
						1	0	0	50.00
Address 3001 CATALPA DR.						Purpose DONATION			
City DAYTON		State OH		Zip Code 45406		Check Number 2227			
To Whom Paid CITY OF DAYTON FINANCE						M	D	Y	Amount
						1	1	0	484.72
Address 101 W. THIRD ST.						Purpose TRAVEL EXPENSE			
City DAYTON		State OH		Zip Code 45402		Check Number 2228			

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full FRIENDS OF RHINE McLIN							
To Whom Paid VERIZON WIRELESS				M 1 1	D 1 7	Y 0 9	Amount 316.31
Address 700 CRANBERRY WOODS DR.		Purpose CELLPHONE					
City CRANBERRY TWP.		State PA	Zip Code 16066	Check Number 2229			
To Whom Paid JEWISH FEDERATION OF GREATER DAYTON				M 1 1	D 1 7	Y 0 9	Amount 217.00
Address 33 W. FIRST ST. SUITE 100		Purpose AD					
City DAYTON		State OH	Zip Code 45402	Check Number 2230			
To Whom Paid RHINE McLIN				M 1 1	D 1 9	Y 0 9	Amount 831.42
Address 1130 GERMANTOWN ST.		Purpose CAMPAIGN COMPUTER					
City DAYTON		State OH	Zip Code 45408	Check Number 2231			
To Whom Paid RHINE McLIN				M 1 1	D 1 9	Y 0 9	Amount 1965.24
Address 1130 GERMANTOWN ST.		Purpose POSTAGE					
City DAYTON		State OH	Zip Code 45408	Check Number 2232			
To Whom Paid MONTGOMERY CTY. DEMOCRATIC PARTY				M 1 1	D 1 9	Y 0 9	Amount 5000.00
Address 131 S. WILKERSON ST.		Purpose MAILINGS					
City DAYTON		State OH	Zip Code 45402	Check Number 2233			
To Whom Paid LEAGUE OF WOMEN VOTERS				M 1 1	D 2 0	Y 0 9	Amount 100.00
Address 131 N. LUDLOW ST.		Purpose DONATION					
City DAYTON		State OH	Zip Code 45402	Check Number 2234			
To Whom Paid WALTER DRAKE				M 1 1	D 2 1	Y 0 9	Amount 222.75
Address DRAKE BLDG. P.O. BOX 3680		Purpose CHRISTMAS CARDS					
City OSHKOSH		State WI	Zip Code 04903-3680	Check Number 2235			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State	Zip Code	Check Number			
		OH					

Statement of Expenditures

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Name of Committee in Full FRIENDS OF RHINE McLIN								
To Whom Paid KETTERING MEDICAL FOUNDATION					M 1 1	D 3 0	Y 0 9	Amount \$150.00
Address 3535 SOUTHERN BLVD.			Purpose DONATION					
City KETTERING		State OH	Zip Code 45429		Check Number 2236			
To Whom Paid DAYTON JEWISH OBSERVER					M 1 2	D 0 1	Y 0 9	Amount \$49.00
Address 33 W. FIRST ST. SUITE 100			Purpose AD					
City DAYTON		State OH	Zip Code 45402		Check Number 2237			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address			Purpose					
City		State OH	Zip Code		Check Number			

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Rhine McLin			
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Postage	M D Y 1 0 2 1 0 9	Fair Market Value 2,528.47
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Mail Service	M D Y 1 0 2 1 0 9	Fair Market Value 736.76
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Postage	M D Y 1 0 2 1 0 9	Fair Market Value 2,528.47
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Postage	M D Y 1 0 1 7 0 9	Fair Market Value 4,251.39
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Mail Service	M D Y 1 0 1 7 0 9	Fair Market Value 619.27
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Postage	M D Y 1 0 2 7 0 9	Fair Market Value 2,522.73
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Postage	M D Y 1 0 2 7 0 9	Fair Market Value 942.04
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Mail Service	M D Y 1 0 2 7 0 9	Fair Market Value 595.82
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

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[R.C. 3517.10(B)(4)]

In-Kind Contributions Received

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Name of Committee in Full Friends of Rhine McLin			
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Printing	M D Y 1 0 2 6 0 9	Fair Market Value 31,840.12
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Printing	M D Y 1 1 0 5 0 9	Fair Market Value 1,929.21
City Columbus	State Zip Code O H 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Ohio Democratic Party	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
Street Address 340 East Fulton Street	Description of Item or Service Printing	M D Y 1 1 0 5 0 9	Fair Market Value 10,394.64
City Columbus	State Zip Code O H 43215	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	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

* Required for contributions from individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupation 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)]