



Oahu League of Republican Women Political Action Committee

IN-KIND AGREEMENT

PERSONAL CONTRIBUTION ONLY (To make a company or PAC contribution fill out the section below)

Name _____

Address _____ City _____ State _____ Zip _____

Phone (Home/Cell) _____ Phone (Home/Cell) _____ E-Mail _____

Employer _____ Occupation _____

Employer/Occupation information is required for contributions totalling more than \$100 since November 9, 2016

COMPANY OR PAC CONTRIBUTION ONLY (To make a personal contribution fill out the section above)

Does this company have a current contract with the state of Hawaii or any of its counties? Yes No If yes, please briefly explain the terms of the contract.

Company or PAC Name _____

Contact Name _____ Title _____

Address _____ City _____ State _____ Zip _____

Business Phone _____ Fax _____ E-Mail _____

ALL CONTRIBUTORS FILL IN THIS SECTION

Date of Contribution _____

Description of Contribution *If contributing gift certificates, please list certificate number(s) if applicable.*

Total Value \$ _____

The Hawaii State Campaign Spending Commission requires that we report these donations as in-kind contributions to the OLRW PAC. The information requested above will be used when filing campaign spending reports.

Please return this form to :

**Oahu League of Republican Women PAC
725 Kapiolani Blvd C105
Honolulu, HI 96813**

For Office Use Only (To be completed by person accepting the in-kind contribution)

Event Code _____ Used for Silent Auction Door Prize Event Use Other _____
Date Received _____ Received By _____