



# 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 \_\_\_\_\_