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## **In-Kind Contributions Received**

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full	<del></del>	······					
Daphne Moehring for Gahanna School Board							
Full Name of Contributor	Employer, Occupation, Labor Organization*			Registration Number, if PAC			
David Stemen							
Street Address	Description of Item or Service		M	D	TY	Fair Market Value	
311 Watling Rd	Payment for	Payment for website and domain name		<b>b</b> 7	1 5	\$66.37	
City	Star te	Zip Code	Receive	d at Fund	traising I	Event?	
Gahanna	OH 43230		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	State OH	Zip Code	Receive	d at Func	_		
Full Name of Contributor	Employer, Occupation, Labor Organization*			O YES O NO Registration Number, if PAC			
	Employa, Occupation, East, Organization						
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
City	Sta te	Zip Code	Receive	d at Fund	traising E	vent?	
	OH		OYE	S	0	NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC				
Street Address	Description of Iter	n or Service	M	D	Y	Fair Market Value	
City	State Zip Code OH		Received at Fundraising Event?  O YES  NO				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registra	nion Nun	nber, if P	AC	
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
City	Sta te	Zip Code	Receive	d at Fund	traising I	Event?	
	OH		Oyes Ono				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC				
Street Address	Description of Iter	n or Service	М	D	Y	Fair Market Value	
City	Sta' te	Zip Code	Receive	d at Fund	draising I	Event?	
	OH.	<u> </u>	OYE	S	Ω	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 OH		Received at Fundraising Event?  OYES  NO				
Full Name of Contributor	Employer, Occup	loyer, Occupation, Labor Organization®		Registration Number, if PAC			
Street Address	Description of Item or Service		М	D	Ϋ́	Fair Market Value	
City	Stal te OH	Zip Code	Receive	ed at Fun-		Event?	

Page Total \$66.37

<sup>\*</sup> 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)]