

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Mary Tedrow</b>				
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>Board of Elections</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Filing Fee</b>	M <b>0</b>	D <b>7</b>	Fair Market Value <b>30.00</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>1</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>Staples</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Labels</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>42.69</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>2</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>The Sign Station</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Campaign Post Cards - DP</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>130.00</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>2</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>The Sign Station</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Campaign Post Cards - Bal</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>131.34</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>3</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>USPS</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Stamps</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>870.00</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>3</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor <b>Mary Tedrow</b>	Employer, Occupation, Labor Organization *	Registration Number, if PAC <b>USPS</b>		
Street Address <b>6269 Lithopolis Rd.</b>	Description of Item or Service <b>Stamps</b>	M <b>1</b>	D <b>0</b>	Fair Market Value <b>174.00</b>
City <b>Groveport</b>	State <b>O</b>   <b>H</b>	Y <b>0</b>	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	Fair Market Value
City	State <b>O</b>   <b>H</b>	Y	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	Fair Market Value
City	State <b>O</b>   <b>H</b>	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

\* 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 appear. [R.C. 3517.10(B)(4)]