## Page 25

## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

				<del></del>
Name of Committee in Full				
Franklin County Democratic Party Full Name of Contributor	The state of the s			
	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
The Ohio Democratic Party Street Address	Description of the control		1,7	V Frie Madest Walter
	Description of Item or Service		M D	Y Fair Market Value
271 E. State St.	Office Space		0 1 0 1	
Columbus	State H	Zip Code 43215	Received at Funda	raising Event?
Columbus Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
· · · · · · · · · · · · · · · · · · ·	Employer, Occup	iation, Labor Organization	Registration Num	ner, ii PAC
The Ohio Democratic Party Street Address	Description of Item or Service		14 15	V Prinkfuller Value
1			M D	Y Fair Market Value
271 E. State St.	Office Space		0 2 0 1	
City	State	Zip Code	Received at Funda	
Columbus	O   h	43215	☐ YES	✓ NO
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC		ber, if PAC	
The Ohio Democratic Party				
Street Address	Description of Item or Service		M D	Y Fair Market Value
271 E. State St.	Office Space		0301	
City	State	Zip Code	Received at Funda	
Columbus	$O \mid h$	43215	☐ YES	☑ NO
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registration Num	ber, if PAC
The Ohio Democratic Party				
Street Address	Description of Item or Service		M D	Y Fair Market Value
271 E. State St.	Office Space		0 4 0 1	1,400.00
City	State	Zip Code	Received at Funds	
<u>Columbus</u>	$O \mid H$	43215	☐ YES	✓ 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
				i iii i iii iii ii ii ii ii ii ii ii ii
City	State	Zip Code	Received at Funds	caising Event?
l,			YES	□ NO
Full Name of Contributor	Employer Occum	ation, Labor Organization *		
	omproyer, occupanon, Easter Organization		registration Functi, it is	
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	State	Zip Code	Received at Funds	raising Event?
,			YES	□ NO
Full Name of Contributor	Employer Occur	ation, Labor Organization *	Registration Num	
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Street Address	Description of Item or Service		M D	Y Fair Market Value
				Tan Market Value
City	State	Zip Code	Received at Funda	Trising Fuest?
	J.	Zip Couc	YES	□ NO
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
	projety occupanting material organization			,,
Street Address	Description of Item or Service		M D	Y Fair Market Value
				<u>                                     </u>
City	State	Zip Code	Received at Fundr	aising Event?
	1		☐ YES	□ NO

Page Total \$ 5,600.00

<sup>\*</sup> 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)]