

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					
FRANKLIN COUNTY DEMOCRATIC PARTY -Campaign Account					
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Friends of John O'Grady					
Street Address		Description of Item or Service		M D Y Fair Market Value	
525 E. Town St.		Venue		0 8 2 5 1 8 150.00	
City		State Zip Code		Received at Fundraising Event?	
Columbus		O H 43215		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Friends of John O'Grady					
Street Address		Description of Item or Service		M D Y Fair Market Value	
525 E. Town St.		Food & Beverage		0 8 2 5 1 8 580.00	
City		State Zip Code		Received at Fundraising Event?	
Columbus		O H 43215		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Friends of John O'Grady					
Street Address		Description of Item or Service		M D Y Fair Market Value	
525 E. Town St.		Games & entertainment		0 8 2 5 1 8 2,067.00	
City		State Zip Code		Received at Fundraising Event?	
Columbus		O H 43215		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Friends of John O'Grady					
Street Address		Description of Item or Service		M D Y Fair Market Value	
525 E. Town St.		Legal Service/Permit		0 8 2 5 1 8 950.00	
City		State Zip Code		Received at Fundraising Event?	
Columbus		O H 43215		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Friends of John O'Grady					
Street Address		Description of Item or Service		M D Y Fair Market Value	
525 E. Town St.		Supplies		0 8 2 5 1 8 837.90	
City		State Zip Code		Received at Fundraising Event?	
Columbus		O H 43215		<input checked="" 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 Y Fair Market Value	
City		State Zip Code		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 Y Fair Market Value	
City		State Zip Code		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 Y Fair Market Value	
City		State Zip Code		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)]