

FOR PAPER FILING ONLY

In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Jeremy Herman			
Full Name of Contributor Jeremy Herman	Employer, Occupation, Labor Organization* Liberty Township	Registration Number, if PAC	
Street Address 181 Rosslyn Avenue	Description of Item or Service T-Shirts	M D Y 0 8 3 1 1 1	Fair Market Value 483.58
City Columbus	State Zip Code OH 43214	Received at Fundraising Event? ☐ YES ☒ NO	
Full Name of Contributor Jeremy Herman	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address 181 Rosslyn Ave	Description of Item or Service Stamps	M D Y 0 9 2 1 1 1	Fair Market Value 6.60
City Columbus	State Zip Code OH 43214	Received at Fundraising Event? ☐ YES ☒ NO	
Full Name of Contributor Jeremy Herman	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address 181 Rosslyn Ave	Description of Item or Service Print Outs	M D Y 1 0 2 0 1 1	Fair Market Value 38.28
City Columbus	State Zip Code OH 43214	Received at Fundraising Event? ☐ YES ☒ NO	
Full Name of Contributor Jeremy Herman	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address 181 Rosslyn Ave	Description of Item or Service Self inking stamp	M D Y 1 0 2 0 1 1	Fair Market Value 24.53
City Columbus	State Zip Code OH 43214	Received at Fundraising Event? ☐ YES ☒ NO	
Full Name of Contributor Jeremy Herman	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address 181 Rosslyn Ave	Description of Item or Service initial deposit to checking account	M D Y 0 9 0 2 1 1	Fair Market Value 125.00
City Columbus	State Zip Code OH 43214	Received at Fundraising Event? ☐ YES ☒ NO	
Full Name of Contributor Rose Pomeroy	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address 273 Heischman Ave	Description of Item or Service Food	M D Y 0 9 2 8 1 1	Fair Market Value \$69.49
City Worthington	State Zip Code OH 43085	Received at Fundraising Event? ☒ 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
City	State Zip Code	Received at Fundraising Event?	
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?	

* 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 employee is a member, if any, must also appear. (R.C. 3517.10(B)(4))

Page Total **\$747.48**