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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

N									
Name of Committee in Full Franklin County Democratic Party-Can	nnaian	Δα	count						
Full Name of Contributor			tion, Labor Organization *	Registros	ion Num	her if DA			
The Ohio Democratic Party	Employer, Occupation, Labor Organization			Registration Number, if PAC					
Street Address	Description of Item or Service			М	D	Υ	Fair Market Value		
340 E. Fulton St.	Office Space						600.00		
City	State Zip Code			0 6 3 0 1 7 600.00 Received at Fundraising Event?					
Columbus	\circ	Н	43215		YES		✓ NO		
Full Name of Contributor						egistration Number, if PAC			
Dempseys Restaurant									
Street Address	Descriptio	n of Iter	n or Service	M	D	Y	Fair Market Value		
346 S. High St			d Gift Card	0 6	1 6	1 7	180.00		
City	Stat		Zip Code	Received at Fundraising Event?					
Columbus	0	Н	43215		YES		✓NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Street Address	Description of Item or Service		n or Service	М	D	Y	Fair Market Value		
City	Stat	e	Zip Code	Received	at Fund	raising Ev	lent?		
					YES	Ü	NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Street Address	Description of Item or Service			М	D	Y	Fair Market Value		
City	Stat	e	Zip Code	Received	1 at Fund	raising Ev	ent?		
City			Elp Code		YES	uionig 2.	No		
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Street Address	Description of Item or Service		М	D	Y	Fair Market Value			
					<u> </u>				
City	Stat	e	Zip Code	Received	1	raising Ev			
				<u> </u>	YES	1 '654	NO		
Full Name of Contributor	Employer,	Occupa	ation, Labor Organization *	Registra	tion Num	ber, if PA	.C		
Street Address	Description of Item or Service		m or Service	М	D	Y	Fair Market Value		
City	Stat	e	Zip Code	Received		raising Ev			
					YES	I CDA	NO		
Full Name of Contributor	Employer,	, Occupa	ation, Labor Organization *	Registra	tion Num	ber, if PA			
Street Address	Description of Item or Service			M	D	Y 	Fair Market Value		
City	Stat	ie	Zip Code	Received	d at Fund	raising Ev	vent?		
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Street Address	Description	n of Ite	m or Service	М	D	Y	Fair Market Value		
City	Stat	te	Zip Code	Receive	d at Fund	raising Ev	yent?		
·					YES		NO		

Page Total \$	780.00
rage rotal 5	780.00

^{*} 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)}