

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Daphne Moehring for Gahanna School Board				
Full Name of Contributor Joan Mast		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 2733 Wickliffe Rd		Description of Item or Service 4 rolls of stamps		M D Y Fair Market Value 1 0 3 0 1 5 \$196.00
City Columbus		State OH	Zip Code 43221	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor Deborah Stemen		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 311 Watling Rd		Description of Item or Service Candy for Creepside		M D Y Fair Market Value 1 0 3 0 1 5 \$45.29
City Gahanna		State OH	Zip Code 43230	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor Deborah Stemen		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 311 Watling Rd		Description of Item or Service Website November/December		M D Y Fair Market Value 1 1 3 0 1 5 \$39.80
City Gahanna		State OH	Zip Code 43230	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO

* 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 employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]