Page	

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

N									
Name of Committee in Full Frontilin County Domographic Ports. Co									
Franklin County Democratic Party - Campaign Account Full Name of Contributor Registration Number of PAC									
	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Ohio AFL-CIO	Labor Organization			PCE PCE					
Street Address	Description of Item or Service			M	D	Y	Fair Market Value		
500 S. Front St. Suite 700	Phone auto dialer			1 0 1 5 1 7 1,390.00 Received at Fundraising Event?					
Columbus	State	тт	Zip Code	Receive	datFunda YES	raising Ev	/ent? ✓NO		
Columbus Full Name of Contributor	O H 43215								
	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Mark Dempsey	Dempsey's Restaurant			<u> </u>		r	<u> </u>		
Street Address	Description of Item or Service			M	D	Y	Fair Market Value		
346 High St	Gift Card			0 6			180.00		
City	State		Zip Code		d at Fundi	raising Ev			
Columbus	Oh 43215			✓ YES NO					
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Mary Woods			Retired	<u> </u>					
Street Address	Description	of Ite	m or Service	M	D	Y	Fair Market Value		
357 Pinney Dr.	1	Of	fice Supply	0 9	1 8	1 7	31.44		
City	State		Zip Code	Receive	d at Fundi	raising Ev	/ent?		
Worthington		H	43085		YES		√NO		
Full Name of Contributor	Employer, C	Registration Number, if PAC							
Sanak Adding				1	I 5	I v	Esta Mada et Value		
Street Address	Description of Item or Service			M	D	Y	Fair Market Value		
City	State		Zip Code	Receive	d at Fund	raising Ev	/ent?		
					YES		□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	State		Zip Code	Receive	d at Fund	raising Ev			
	<u> </u>			YES 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	State		Zip Code	Receive	d at Fund	raising Ev	/ent?		
				YES		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		
	2 Stanfall of Roll of Sol 1800								
City	State		Zip Code	Receive	d at Fund	raising Ev	/ent?		
					YES		□no		
Full Name of Contributor	Employer, Occupation, Labor Organization *			Registration Number, if PAC					
Street Address	Description of Itam or Comics		m or Service	M	D	Y	Fair Market Value		
Sueen Address	Description of Item or Service			141			an ividiact value		
City	State		Zip Code	Receive	d at Fund	raising Ev	vent?		
1			1		YES		NO		

Page Total \$ 1,601.44

^{*} 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)]