## **In-Kind Contributions Received**

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Page	

Prescribed by Secretary of State 03/05

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Name of Committee in Full Friends of Jeff Davis	•	
	LE Jame Organization Labor Organization	Profes (Co. N. orbor (CDAC)
Full Name of Contributor Amy Dawson	Employer, Occupation, Labor Organization	ion* Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
6084 Winnebago St	social media marketing	1 1 2 5 1 5 \$245.77
City	Sta te Zip Code	Received at Fundraising Event?
Grove City	OH 43123	Oyes O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	on* Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta te Zip Code	Received at Fundraising Event?
	OH	O YES O NO
Ful! Name of Contributor	Employer, Occupation, Labor Organization	
	disployer, occupation, Euror organization	on registration, a rice
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
	ОН	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	
		on registration rander, if 1770
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
	OH	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
	OH	
Full Name of Contributor	Employer, Occupation, Labor Organization	O YES O NO  No Registration Number, if PAC
. With the or commodity	Employer, Occupation, amoving,	on registration range, a rice
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta' te Zip Code	Received at Fundraising Event?
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5 H ST _ = 1 C_===1		O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization	on* Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
	,	
City	Sta te Zip Code	Received at Fundraising Event?
CRY	OH Zip Code	
		OYES ONO
Full Name of Contributor	Employer, Occupation, Labor Organization	on* 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?
	OH	Oves O NO

<sup>\*</sup> 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)]