

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady			
Full Name of Contributor See Attached Spreadsheet		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City		State Zip Code	
		Registration Number, if PAC	
		M D Y Fair Market Value	
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

* 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)]