

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Franklin County Green Party					
Full Name of Contributor Connie Hammond		Employer, Occupation, Labor Organization* Retired		Registration Number, if PAC n/a	
Street Address 166 Acton Road		Description of Item or Service Payment for parade registration		M D Y Fair Market Value 0 7 0 1 1 3 \$50.00	
City Columbus		State OH	Zip Code 43214	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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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	Zip Code	Received at Fundraising Event?	
		OH		<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)]