

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full The Committee to Elect Stephanie Cooper			
Full Name of Contributor Stephanie Cooper		Employer, Occupation, Labor Organization* Columbus Messerly	
Street Address 1182 Carnoustie Circle		Registration Number, if PAC N/A	
City Grove City		Description of Item or Service Adv.	
State OH		Fair Market Value 10/15/15 316⁰⁰	
Zip Code 43123		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Derick Cooper		Employer, Occupation, Labor Organization* Call Fire	
Street Address 1410 2nd St Suite 20		Registration Number, if PAC	
City Sanita Monica		Description of Item or Service Asbu Call	
State CA		Fair Market Value 11/12/15 18⁰⁰	
Zip Code 90401		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		Fair Market Value	
Zip Code		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		Fair Market Value	
Zip Code		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		Fair Market Value	
Zip Code		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		Fair Market Value	
Zip Code		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		Fair Market Value	
Zip Code		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 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)]