

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Cotter for Community						
Full Name of Contributor	Employer, Occup	Registration Number, if PAC				
Ohio Education Association		rogistration runnes, it is c				
Street Address	Labor Description of Item or Service		м	D	Y	Fair Market Value
225 E. Broad St., Box 2550	mailing			2 9	1 5	4,278.91
City	State Zip Code		Received at Fundraising Event?			
Columbus	O H	43216		at rustura YES	aistiig Ev	✓ NO
Full Name of Contributor	Employer, Occu	Registration Number, if PAC				
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	State Zip Code		Received at Fundraising Event?			
	1			YES		□no
Full Name of Contributor	Employer Occur	pation, Labor Organization *			er if PA	
Tall Name of Condition	Limployer, Occu	Registration Number, if PAC				
Street Address	Description of It	Description of Item or Service		D	Y	Fair Market Value
			1 1			
City	State Zip Code		Received	at Fundra	aising Ev	ent?
				YES		□NO
Full Name of Contributor	Employer, Occur	pation, Labor Organization *	Registration Number, if PAC			
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
			1 1		1	
City	State	Zip Code	Received	at Fundra	aising Ev	ent?
		1	_ i,	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
City	State	Zip Code	Received	at Fundra	aising Ev	ent?
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Fuli Name of Contributor	Employer, Occu	Registration Number, if PAC				
Street Address	Description of Item or Service		MI	D	Y	Fair Market Value
on sections.			"	۱	1	
City	State	Zip Code	Received	at Funde	niging Gr	ent?
City	State	Zip Code	1 —	YES	aising Ev	NO
E.Il Name of Contributor	Frankrier Oss	i nation I show Occasionation #	44-044		ar if DA	
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
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City	State	Zip Code	Received	at Fundra	aisino Ex	L
City		Zip code	! —	YES	manne C	□NO
Full Name of Contributor	Employer, Occu	Registration Number, if PAC				
		<u> </u>				
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
	 	<u></u>	1			L
City	State	Zip Code	Received		atsing Ev	
			<u> </u>	YES		∐NO

Page Total \$ 4,278.91

^{*} 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)]