

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				
Cotter for Community	<u>.</u>			
Full Name of Contributor	Employer, Occupation, Labor Organization •		Registration Number, if PAC	
Ohio Education Association				
Street Address	Description of Item or Service		M D Y Fair Market Value	
225 E. Broad St. , Box 2550			0 9 2 1 1 5 1,05	5.56
City	State Zip Code		Received at Fundraising Event?	
Columbus	_ t T	43216	YES VNO	
	Employer, Occupation, Labor Organization *			
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?	
			YES NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Street Address	Description of It	em or Service	M D Y Fair Market Value	
City	State	Zip Code	Received at Fundraising Event?	
City	State	Zip Code	YES NO	i
		1		
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?	
		†	YES 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?	
city	Bulle	Zip Code	YES NO	
nul co il i	E1 O	Table Committee 1	Registration Number, if PAC	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, it FAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
Direct / Institute of the Control of	2 2001, p. 1011 0 2 3			
Ca	State	Zip Code	Received at Fundraising Event?	
City	State	Zip Code	YES 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	
			1	
City	State	Zip Code	Received at Fundraising Event?	
			☐ YES ☐ NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Č., A.I.	Description of Item or 5in-		M D Y Fair Market Value	
Street Address	Description of Item or Service			
City	State	Zip Code	Received at Fundraising Event?	
			YES NO	

Page Total \$ 1,055.56

^{*} 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)]