

# Ohio Campaign Finance Report

**TERMINATED**

Prescribed by Secretary of State 3 05

Full Name of Committee <i>Committee to Re-elect Jessica Vargo to Copley Fairlawn BOE</i>						Registration Number, if PAC <i>N/A</i>	
Full Name of Candidate <i>Jessica H Vargo</i>							
Street Address <i>3781 Royal Rock Rd</i>				Office Sought <i>BOE</i>		District <i>Copley Fairlawn</i>	
City <i>Copley</i>				State <i>OH</i>	Zip Code <i>44321</i>		
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General	<input checked="" type="checkbox"/> Post-General	<input type="checkbox"/> Annual Year		
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input checked="" type="checkbox"/> Termination	<input type="checkbox"/> Semiannual		
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		M D Y <i>1 1 0 7 1 7</i>	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box  No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(11) for details.

1. Amount brought forward from last report	\$	0	00
2. Total monetary contributions (From Form No. 31-A)	\$	0	00
3. Total other income (From Form No. 31-A-2)	\$	0	00
4. Total funds available from lines 1, 2, & 3	\$	0	00
5. Total monetary expenditures (From Form No. 31-B)	\$	0	00
6. Balance on hand (line 4 minus line 5)	\$	0	00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	317	29
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0	00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	0	00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0	00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0	00
12. Value of independent expenditures made (From Form No. 31-U)	\$	0	00
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$		

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SUMMIT COUNTY  
BOARD OF ELECTIONS**

2017 DEC -4, P11 2:47

#1486

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

*Jessica Vargo*  
Print Name and Title (Treasurer and Deputy Treasurer only)

*Jessica H Vargo*  
Signature

*11/30/17*  
Date

Contribution pages 1

Expenditure pages 0

Other pages 0

Total pages 1

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full  
**Committee to Re-elect Jessica Vargo to Copley Fairlawn BOE**

Full Name of Contributor <b>Jessica Vargo</b>	Employer, Occupation, Labor Organization*	Registration Number, if PAC <b>N/A</b>
Street Address <b>3781 Royal Rock Rd</b>	Description of Item or Service <b>Advertising</b>	M   D   Y   Fair Market Value <b>10   21   17   317.29</b>
City <b>Copley</b>	State   Zip Code <b>OH   44321</b>	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? <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? <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? <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? <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? <input type="radio"/> YES <input type="radio"/> NO
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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? <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)]