### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:	20220	0315				Repor		CA	NDII	DATE	<b>\</b>	CC	MMITT	EE		LOBI	BYIST		
Name of Filing Committee, (	Candida	te or Lo	obbyis	st:	C	OOPE	R,JILL	NIXC	ON										
Street Address:																			
City:								State	e:				Zip Co	ode:	156	568			
TYPE OF REPORT 6TH TUESDA PRE-PRIMAR		1.	2ND I PRIM	FRIDAY ARY	PRE-	2.	30 DA		Р	OST-	3.		AMEND REPOR			Yes	N	)	<b>\</b>
(place X to the right of		4.	2ND F		PRE-	5.	30 DA		Р	POST-	6.		TERMIN REPOR		N	Yes	No	0	<b>√</b>
report type) ANNUAL RE	EPORT	7. <b>X</b>	Year	2022				NG ME CHEC					PAPER			$\checkmark$	DISKI	ETTE	
Name of Office Sought by Ca	andidate	e:						DAT	ΈO	F ELE	CTI	ON	District Numbe		fice de	Par	ty Code	Cour Code	
REPRESENTATIVE IN THE	GENER <i>A</i>	AL ASSI	EMBL'	Y				МО		DAY	'	YEAR	55	ST	Н	REP	1	65	
									11		8	2022		(SE	E INS	TRUCTI	ONS FOR	CODES	)
Summary of Receipts a Expenditures from:	and	МО	DA	Υ	YEAR			МО		DAY	,	YEAR	F	OR O	FFIC	E USE	ONLY		
		1	11	29	202	22 <b>T</b>	0		12		31	2022							
A. Amount Brought Forwa	rd From	Last Re	eport				\$			(	(14,	037.59)	]						
B. Total Monetary Contribu	utions A	nd Rece	eipts	(From	Sched	ule I)	\$					0.00	]						
C. Total Funds Available (S	Sum Of L	Lines A	and E	3)			\$			(	(14,	037.59)							
D. Total Expenditures (Fro	m Sche	dule III	I)				\$					0.00							
E. Ending Cash Balance (So	ubtract	Line D	From	Line C	:)		\$			(	14,0	037.59)	]						
F. Value Of In-Kind Contrib	butions	Receive	ed (Fr	om Sc	hedule	II)	\$					0.00							
G. Unpaid Debts And Oblig	ations (	From S	Schedu	ule IV)	)		\$					0.00			'				
					AFFI	DAVI	T SE	CTIC	NC										
PART I - If this is a Committ	ee repo	rt, trea	surer	sign h	ere. If	this is	a Caı	ndidat	te re	port, c	cano	lidate sig	gn here	•					
I swear (or affirm) that this rep correct and complete.	ort, inclu	ding the	attacl	hed sch	edules f	filed on	paper	or by e	electr	ronic m	ediu	m, are to	the best	of my	know	ledge	and bel	ief , tr	ue
Sworn to and subscribed before day of	me this		20									Signature	e of Pers	on Sub	mitti	ng Rep	ort		_
	Signature	<b>.</b>	_				- -		,				Pri	nted N	lame				_
My Commission Expires							_		•				Em	ail					
мо	)	DA	AY		YR					Are	ea C	ode	Dayti	me Te	lepho	ne Nu	mber		$\underline{}$
Part II- If this is a report of	a candi	date's a	autho	rized (	Commi	ttee, C	andid	ate si	nall s	sign he	ere.								
I swear (or affirm) that to the b No 320) as amended.	est of my	/ knowle	edge ar	nd belie	f this p	olitical	comm	ittee h	as no	ot viola	ted a	any provis	ions of t	he act	of Ju	ne 3,1	937 (P.	L. 133	3,
Sworn to and subscribed before reday of	me this		20									s	ignature	of Ca	ndida	te			_
			-				_						Print	ted Na	me				- $ $
Sign My Commission Expires	nature						_												_
	ilutui C								•				Em	ail					

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
COOPER,JILL NIXON	From:	11/29/202	<u>22</u> To:	12/31/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	\$	0.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

#### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period						
		'	From:		То	:			
		·		DATE			AMOUNT		
Full Name of Contributing Committee			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	or Candidate		Reporting Period						
			From: To			):			
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	•)						
								PAGE TOTAL	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

lame of Filing Committee or Candidate		Reporting Period							
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page,		age, Sectio	n 3.			\$	(	0.00	

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate		Reporting Period							
				From:			To	То:		
					D	ATE		AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	\$	0.00	
Mailing Address										
City	State Zip Code (Plus 4)			s 4)						
Employer Name	•				Occupation					
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.									PAGE TOTAL	
								\$	0.00	

### OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	Name of Filing Committee or Candidate		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	0.00

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Peri	od	
COOPER,JILL NIXON	From:	<u>11/29/2022</u> <b>To:</b>	12/31/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address		_				<b> </b>		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:		•	•			•			
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				Fro	m:			To:		
							DATE			AMOUNT
Full Name of Contributor					мо	)	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(Plus 4)							
Employer of Contributor				Occupation					<u> </u>	
Employer Mailing Address/Principal Place of Business City			State	e i	Zip	Code(Plus 4)	Descri	ption o	of Contribution	
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Ki	nd(	Contributions D	etaile	ed					PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period					
			From			То:				
							AMOUNT			
To Whom Paid				DAY	YEAR					
Mailing Address						\$	0.00			
City	State Zip Code (Plus 4) Description of Expenditure									
Enter Crand Total of Evenenditures on Dags 1. Deposit Cover Dags Thomas							PAGE TOTAL			
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			<i>,</i> .			\$	0.00			