

TUN PAPER FILLING UNIT

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Page 1

6/30/16

| | | | | | |
|--|--|---|--------------------------|---|--------------------------|
| Name of Committee in Full Dallas Baldwin for Sheriff | | | | | |
| Full Name of Contributor IBEW PAC Voluntary Fund | | | | Registration Number, if PAC | |
| Street Address 900 Seventh Street, N.W. | | Employer/Occupation/Labor Organization* | | M D Y 0 5 0 2 1 6 | Amount \$450 |
| City Washington | | State DC | Zip Code 20001 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor IBEW PAC Voluntary Fund | | | | Registration Number, if PAC | |
| Street Address 900 Seventh Street, N.W. | | Employer/Occupation/Labor Organization* | | M D Y 0 5 1 2 1 6 | Amount \$200 |
| City Washington | | State DC | Zip Code 20001 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Paley For Judge | | | | Registration Number, if PAC | |
| Street Address 545 E. Town Street | | Employer/Occupation/Labor Organization* | | M D Y 0 5 1 7 1 6 | Amount \$50 |
| City Columbus | | State OH | Zip Code 43215 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Hunter, Carnahan, Shoub & Byard | | | | Registration Number, if PAC | |
| Street Address 3360 Tremont Road, 2nd Floor | | Employer/Occupation/Labor Organization* | | M D Y 0 6 1 2 1 6 | Amount \$450 |
| City Columbus | | State OH | Zip Code 43221 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Peter Tobin | | | | Registration Number, if PAC | |
| Street Address 2095 Palouse Dr | | Employer/Occupation/Labor Organization* Retired US Marshall | | M D Y 0 5 0 5 1 6 | Amount \$500 |
| City London | | State OH | Zip Code 43140 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Carpenters Local Union 200 PCE | | | | Registration Number, if PAC | |
| Street Address 1545 Alum Creek Dr. | | Employer/Occupation/Labor Organization* | | M D Y 0 5 1 8 1 6 | Amount \$1,600 |
| City Columbus | | State OH | Zip Code 43209 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Johnny E. Brown | | | | Registration Number, if PAC | |
| Street Address 106 N High Street Apt. 604 | | Employer/Occupation/Labor Organization* | | M D Y 0 5 2 0 1 6 | Amount \$250 |
| City Columbus | | State OH | Zip Code 43215 | Form (Cash, Check, etc.) Check | |

* 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 also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

Total expenditures this event.

\$0.00
\$11,100.00

\$0.00

450.00