

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Dallas Baldwin for Sheriff				
Full Name of Contributor Cizitens for Staci Baker			Registration Number, if PAC	
Street Address 2990 E. Livingston Avenue	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M 0	D 5
City Columbus	State OH	Zip Code 43232	Y 2	Amount \$250.00
Full Name of Contributor Law Offices of Saia & Piatt, INC			Registration Number, if PAC	
Street Address 713 S. Front Street	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M 0	D 5
City Columbus	State OH	Zip Code 43026	Y 1	Amount \$250.00
Full Name of Contributor Sadia Afaz, Mohammed Haque			Registration Number, if PAC	
Street Address 162 Bentrige Drive	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M 0	D 5
City Springboro	State OH	Zip Code 45066	Y 2	Amount \$50.00
Full Name of Contributor Gary Szerszen			Registration Number, if PAC	
Street Address 1000 Urlin Drive, Apt #618	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M 0	D 5
City Columbus	State OH	Zip Code 43212	Y 2	Amount \$100.00
Full Name of Contributor Misc. Contributions (Under \$25.00)			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M 0	D 5
City OH	State OH	Zip Code	Y 2	Amount \$172.00
Full Name of Contributor Barbara E. Baldwin, Treasurer			Registration Number, if PAC	
Street Address 3697 Juniper Street	Employer/Occupation/Labor Organization* Returned Golf Prize Money		M 0	D 5
City Grove City	State OH	Zip Code 43123	Y 2	Amount \$100.00
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D
City	State OH	Zip Code	Y	Amount

* 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

10,417.00

Total expenditures this event.

8,138.41

Page Total \$ 922.00