



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee DALLAS BALDWIN for SHERIFF				
Full Name of Contributor J. E. Smith			Registration Number, if PAC	
Street Address 2080 Berry Hill Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Grove City		State OH	Zip Code 43123	Amount \$ 200.00
Form (Cash, Check, Etc) Check # 6228				
Full Name of Contributor Geoff Stobart			Registration Number, if PAC	
Street Address 3385 McCammon Estates Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Lewis Center		State OH	Zip Code 43035	Amount \$ 100.00
Form (Cash, Check, Etc) CASH				
Full Name of Contributor Dewey R. Stokes			Registration Number, if PAC	
Street Address 750 Willow Bend Lane		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Columbus		State OH	Zip Code 43204	Amount \$ 100.00
Form (Cash, Check, Etc) Check # 10478				
Full Name of Contributor R. Michael Taylor			Registration Number, if PAC	
Street Address 222 East Town Street, 2W		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Columbus		State OH	Zip Code 43215	Amount \$ 250.00
Form (Cash, Check, Etc) Check # 288				
Full Name of Contributor Columbus Franklin County, AFL-CIO PCE			Registration Number, if PAC	
Street Address 1545 Alum Creek Drive, 2nd Floor		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Columbus		State OH	Zip Code 43209	Amount \$ 100.00
Form (Cash, Check, Etc) Check # 1337				

* 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
\$ 3,590.00

Total Expenditures This Event
\$ 0

Page Total \$ 750.00