Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR TOM BAKER			., .		
Full Name of Contributor Peter M. Marsh / Beverly A. Marsh			Registration Number, if PAC		
Street Address 3563 Goldenrod Street	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 3 2 8 1 7	Amount \$50.00	
Full Name of Contributor Keith W. Justus / Marifrances Justus			Registration Number, if	PAC	
Street Address 4873 Brixston Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 3 2 8 1 7	Amount \$50.00	
Full Name of Contributor Randy Walker				Registration Number, if PAC	
Street Address 5602 Riverside Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M D Y 0 4 1 1 1 7	Amount \$50.00	
Full Name of Contributor Deborah A. or Steven R. Hurley			Registration Number, if	PAC	
Street Address 5846 Houchard Road	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	0 3 2 8 1 7	Amount \$50.00	
Full Name of Contributor William E. Baker Jr. / Virginia Baker	·		Registration Number, if	PAC	
Street Address 4379 Newton Road	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Newark	State OH	Zip Code 43055	0 3 2 3 1 7	Amount \$100.00	
Full Name of Contributor Christopher L. Walter / Kimberly R. W	Registration Number, if PAC				
Street Address 5394 Riverbrook Drive	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 3 1 8 1 7	Amount \$100.00	
Full Name of Contributor Roger E. Escolas / Julienne G. Escolas			Registration Number, if PAC		
Street Address 5068 Stonecraft Ct.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M D Y 0 3 2 4 1 7	Amount \$100.00	
Full Name of Contributor Timothy A. Roberts / Teresa D. Robe	rts		Registration Number, if	PAC	
Street Address 4548 Braithway St.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M D Y 0 3 2 8 1 7	Amount \$100.00	

Page Total \$600.00

^{*} 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)]