

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR TOM BAKER									
Full Name of Contributor Joseph Erb							Registration Number, if PAC		
Street Address 3453 Darby Glen Blvd.				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Hilliard		State OH		Zip Code 43026		M 0		D 3	
						Y 2		Amount \$250.00	
Full Name of Contributor Citizens For Kunze							Registration Number, if PAC		
Street Address 865 Macon Alley				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43206		M 0		D 3	
						Y 2		Amount \$300.00	
Full Name of Contributor David J. Baker / Michele M. Baker							Registration Number, if PAC		
Street Address 8708 Wince Rd				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check	
City Newark		State OH		Zip Code 43055		M 0		D 3	
						Y 2		Amount \$250.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						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)]