

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Baker for the Board</b>					
Full Name of Contributor <b>Melonie Buller</b>				Registration Number, if PAC	
Street Address <b>1116 Baumock Burn Dr.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43235</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Ian B. MacConnell</b>				Registration Number, if PAC	
Street Address <b>238 E. Patterson Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>200.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43202</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Carl C. Kipp, III</b>				Registration Number, if PAC	
Street Address <b>179 E. Tompkins St.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>40.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43202</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Michael D. Cole</b>				Registration Number, if PAC	
Street Address <b>350 S. Huron Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43204</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Jimmy J. Boggs</b>				Registration Number, if PAC	
Street Address <b>693 S. Ogden Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>25.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43204</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Joyce Leeth</b>				Registration Number, if PAC	
Street Address <b>244 Barcelona Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43081</b>		Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Michelle Sutton</b>				Registration Number, if PAC	
Street Address <b>570 Nashoba Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   7   3   1   0   7	Amount <b>25.00</b>
City <b>Columbus</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43223</b>		Form(Cash, Check, etc) <b>Check</b>	

\* 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 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

Page Total \$ 425.00