

TUN PAPER FILING UNIT II

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Dallas Baldwin for Sheriff					
Full Name of Contributor Ram V. Rajadhyaksha				Registration Number, if PAC	
Street Address P.O. Box 1131		Employer/Occupation/Labor Organization* DLZ, Partner		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	M 0	D 4	Y 116
				Amount \$1,000	
Full Name of Contributor United Steel Workers District 1				Registration Number, if PAC	
Street Address 777 Dearborn Park Ln., Suite J		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43085	M 1	D 0	Y 1716
				Amount \$250	
Full Name of Contributor Woodrow Fox Sr.				Registration Number, if PAC	
Street Address 233 North Bend		Employer/Occupation/Labor Organization* Owner, Woody Fox Bail Bonds		Form (Cash, Check, etc.) Check	
City Pataskala	State OH	Zip Code 43062	M 1	D 0	Y 1116
				Amount \$250	
Full Name of Contributor Jagdish Davada Trust				Registration Number, if PAC	
Street Address 2524 Desert Drive		Employer/Occupation/Labor Organization* Best Effort		Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 1	D 0	Y 0516
				Amount \$250	
Full Name of Contributor Columbus Franklin County, AFL-CIO PCE				Registration Number, if PAC	
Street Address 1545 Alum Creek Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1116
				Amount \$250	
Full Name of Contributor Richard Holz				Registration Number, if PAC	
Street Address 1660 Gables Ct.		Employer/Occupation/Labor Organization* Attorney, Ice Miller		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43232	M 1	D 0	Y 0516
				Amount \$500	
Full Name of Contributor Christie L. Angel				Registration Number, if PAC	
Street Address 206 E. Beck		Employer/Occupation/Labor Organization* Calfee, Halter & Griswold, Attorney		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	M 1	D 0	Y 1116
				Amount \$250	
Full Name of Contributor Don McTigue				Registration Number, if PAC	
Street Address 545 E. Town Street		Employer/Occupation/Labor Organization* Attorney, self		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1116
				Amount \$250	

* 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)]

\$3,000