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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Baker for the Board									
Full Name of Contributor Registration Number, if					ber, if PA	.C			
Columbus Franklin County AFL CIO P	CE								
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, Che	ck, etc.)	
1545 Alum Creek Dr. 2nd Fl						_	Check		
City	Stat	te	Zip Code	М	D	Y	Amount		
Columbus	Ο,	Н	43209	1,0	2 1	0 7		200.00	
Full Name of Contributor				Registr	ation Nun	ber, if PA	C		
Ohio AFL-CIO PCE									
Street Address	Employer	/Оссира	ntion/Labor Organization*				Form (Cash, Che	ck, etc.)	
395 E. Broad St. Suite 300	Ì						Check		
City	Stat	te	Zip Code	М	D	Y	Amount		
Columbus	0	Н	43215	1 0	2 1	0 7		250.00	
Full Name of Contributor						ber, if PA	C		
Danielle Weber									
Street Address	Employer.	/Occupa	ation/Labor Organization*	Ь			Form (Cash, Che	ck. etc.)	
809 S. Burgess Ave.	` `	•	3				Check		
City	Stat	te	Zip Code	М	D	Y	Amount		
Columbus	0	H	43204	1 0			i incum	100.00	
Full Name of Contributor			10201			ber, if PA		100.00	
Bailene Buckner				registi	acion riun	1001, 11 1 2			
Street Address	Employer	/Оссила	ation/Labor Organization*	<u> </u>			Form (Cash, Che	ck etc.)	
447 Demorest Ave.	Zpioye.	, o coupe	Mon Buoor Organization				Check	ck, cic.)	
City	Sta	to	Zip Code	М	D	l Y	Amount		
Columbus	0	̈́Η	43204	1	1 .		Amount	40.00	
Full Name of Contributor	10		40204	1 0			<u> </u>	40.00	
E. Renee Derthick Street Address	Ir1	/0	Δ; /7 -1 · · · · · · · · · · · · · · · · ·	<u> </u>			F (0.1.0)		
	Employer	/Occupa	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
1855 SW Springfield Ct.	0.		le: 6 t	T 3.	-		Check		
City De Lore Cites	Sta		Zip Code	M	D	Y	Amount	25 00	
Palm City	F	L	34990	10				25.00	
Full Name of Contributor	. 1			Registr	ation Nun	iber, if PA	AC .		
Dewey Stokes, Committee for Dewey Stokes									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
750 Willow Bend Ln.			In a .	T		,	Check		
City	Sta		Zip Code	M	D	Y	Amount		
Columbus	0	П	43204			0 7		50.00	
Full Name of Contributor				Registr	ation Nun	nber, if PA	IC .		
Robert W. Coles									
Street Address	Employer	/Occupa	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
5550 Knollwood Dr.							Check	_	
City	Sta		Zip Code	M	D	Y	Amount		
Columbus	0;	H	43232	$1 \mid 0$	1 8	0 7		50.00	
Full Name of Contributor Registration Number, if PAC									
Fred Tompkins									
Street Address	Employer	/Occupa	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
423 Clarendon Ave.							Check		
City	Stat	te	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43223	1 1 0	1 8	0 7		50.00	

Page Total \$	765.00

^{*} 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 appear. [R.C. 3517.10(B)(4)]