



**Statement of Contributions Received
at a Social or Fund-Raising Event**

Form 31-E
R.C. 3517.10(B)

Full Name of Committee DALLAS BALDWIN for SHERIFF				
Full Name of Contributor Theodore Owens			Registration Number, if PAC	
Street Address 545 Metro Place South, Suite 100	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018	Amount \$ 60.00
City Dublin	State OH	Zip Code 43017	Form (Cash, Check, Etc) CASH	
Full Name of Contributor Richard J. Ryan			Registration Number, if PAC	
Street Address 125 Frankfort Square	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018	Amount \$ 25.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, Etc) Check # 3029	
Full Name of Contributor James J. Scanlon			Registration Number, if PAC	
Street Address 335 Hastings Court	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018	Amount \$ 100.00
City Westerville	State OH	Zip Code 43082	Form (Cash, Check, Etc) Check # 11016	
Full Name of Contributor Daniel Sells			Registration Number, if PAC	
Street Address 1532 Oak Valley Blvd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018	Amount \$ 50.00
City Minneola	State FL	Zip Code 34715	Form (Cash, Check, Etc) Check # 1248	
Full Name of Contributor Michael Sexton			Registration Number, if PAC	
Street Address 984 Highland Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018	Amount \$ 100.00
City Columbus	State OH	Zip Code 43201	Form (Cash, Check, Etc) Check # 1150	

* 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)]

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
~~\$ 2,110.00~~ 3,590.00

Total Expenditures This Event
0

Page Total \$ 335.00