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

Event Date 5/22/17	_
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Prescribed by Secretary of State 03/05

Name of Committee in Full Dallas Baldwin for Sheriff			
Full Name of Contributor Ronald E. Myers			Registration Number, if PAC
Street Address 177790 Caldwell Lakes Road	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		0 5 2 2 1 7 Amount \$500.00
City Caldwell	Sta te OH	Zip Code 43724	Form (Cash, Check, etc.) Check #1721
Full Name of Contributor Byers Mazda/Subaru		<u> </u>	Registration Number, if PAC
Street Address 2455 Billingsley Road	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M D Y Amount 0 5 1 7 1 7 \$250.00
City Columbus	Stal te OH	Zip Code 43235	Form (Cash, Check, etc.) Check #63452
Full Name of Contributor Gary L. Rountree			Registration Number, if PAC
Street Address 7955 Sethwick Road	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		0 5 2 2 1 7 Amount \$150.00
City <b>Dublin</b>	Sta te OH	Zip Code 43016	Form (Cash, Check, etc.) Check #5074
Full Name of Contributor  New Visions Group, LLC			Registration Number, if PAC
Street Address 66 East Lynn Street	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		M D Y Amount \$150.00
City Columbus	Sta te OH	Zip Code 43216	Form (Cash, Check, etc.) Check #3812
Full Name of Contributor Cindi Morehart			Registration Number, if PAC
Street Address 98 Grandview Drive	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		0 5 2 2 1 Amount \$50.00
<sup>City</sup> Dublin	Stal te OH	Zip Code 43017	Form (Cash, Check, etc.) Check #3350
Full Name of Contributor John S. Audet			Registration Number, if PAC
Street Address 926 S. Roosevelt	Employer/Occupation/Labor Organization* Golf Outing/Fundraiser		0 5 2 3 1 7 Amount \$150.00
City Bexley	OH Stal te	Zip Code 43209	Form (Cash, Check, etc.) Check #1407
Full Name of Contributor Shannon M. Gilbert			Registration Number, if PAC
Street Address 13632 Daysprings Way	Golf Ou	ation/Labor Organization* ting/Fundraiser	0 5 2 6 1 7 Amount \$245.00
City Pickerington	Sta te OH	Zip Code 43147	Form (Cash, Check, etc.) Check #3474

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 No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00 10,417,00 Total expenditures this event.

**\$0.00** 8,138.41

Page Total \$ 1,495.00

<sup>\*</sup> 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)]