

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Tom Baker					
Full Name of Contributor Mark Brandts				Registration Number, if PAC	
Street Address 4907 Brixston Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M 0	D 3	Y 3
			3	0	1
			3	0	3
			Amount \$100.00		
Full Name of Contributor Michele Baker				Registration Number, if PAC	
Street Address 8708 Wince Rd NE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Newark	State OH	Zip Code 43055	M 0	D 3	Y 3
			2	7	1
			3	2	3
			Amount \$100.00		
Full Name of Contributor Todd A. Abens				Registration Number, if PAC	
Street Address 685 Chaffin Rdg		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214	M 0	D 4	Y 3
			0	3	1
			3	0	3
			Amount \$50.00		
Full Name of Contributor George W. Haenszel				Registration Number, if PAC	
Street Address 2400 Bryden Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 0	D 4	Y 3
			0	3	1
			3	0	3
			Amount \$50.00		
Full Name of Contributor Thomas E. Kreber				Registration Number, if PAC	
Street Address 5985 Wilcox Pl Ste E		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	M 0	D 3	Y 3
			2	2	1
			3	2	3
			Amount \$50.00		
Full Name of Contributor Eric W. Yocum				Registration Number, if PAC	
Street Address 551 Cliffside Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Lexington	State OH	Zip Code 44904	M 0	D 3	Y 3
			3	0	1
			3	0	3
			Amount \$50.00		
Full Name of Contributor Steven R. Hurley				Registration Number, if PAC	
Street Address 5846 Houchard Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	M 0	D 4	Y 3
			0	3	1
			3	0	3
			Amount \$50.00		
Full Name of Contributor Kelly J. Urse				Registration Number, if PAC	
Street Address 3535 Patcon Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M 0	D 4	Y 3
			0	3	1
			3	0	3
			Amount \$35.00		

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$485.00**