



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 E. O. Smith			Registration Number, if PAC	
Street Address 2080 Berry Hill Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/01/2018	Amount \$ 50.00
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) Check # 6256	
Full Name of Contributor E. O. Smith			Registration Number, if PAC	
Street Address 2080 Berry Hill Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/01/2018	Amount \$ 300.00
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) Check # 6257	
Full Name of Contributor Dewey R. Stokes			Registration Number, if PAC	
Street Address 750 Willow Bend Lane	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/02/2018	Amount \$ 50.00
City Columbus	State OH	Zip Code 43204	Form (Cash, Check, Etc) Check # 10568	
Full Name of Contributor Lori M. Tyack			Registration Number, if PAC	
Street Address 4080 Chelsea Bridge Lane	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/03/2018	Amount \$ 125.00
City Columbus	State OH	Zip Code 43230	Form (Cash, Check, Etc) Check #2306	
Full Name of Contributor Jeffrey Warbis			Registration Number, if PAC	
Street Address 3793 Clay Bank Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/06/2018	Amount \$ 50.00
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, Etc) Cash	

* 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

14,200.00

Total Expenditures This Event

3,501.00

Page Total \$ 575.00