

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Baker for the Board							
Full Name of Contributor Charles D. Patterson					Registration Number, if PAC		
Street Address 2932 Gratz Ridge Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43123	M 0	D 7	Y 1	Amount 50.00	
Full Name of Contributor Keith J. Neal					Registration Number, if PAC		
Street Address 425 Columbian Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43223	M 0	D 7	Y 1	Amount 25.00	
Full Name of Contributor Catherine E. Elkins					Registration Number, if PAC		
Street Address 392 Crestview Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M 0	D 7	Y 2	Amount 25.00	
Full Name of Contributor William D. Faith					Registration Number, if PAC		
Street Address 340 Clinton Hts. Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M 0	D 7	Y 2	Amount 25.00	
Full Name of Contributor Carol J. Stewart					Registration Number, if PAC		
Street Address 192 S. Princeton Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43223	M 0	D 7	Y 2	Amount 30.00	
Full Name of Contributor Sicaras Properties - George Sicaris, Sole Proprietor					Registration Number, if PAC		
Street Address 2988 N. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M 0	D 7	Y 2	Amount 25.00	
Full Name of Contributor Robert J. Weiler					Registration Number, if PAC		
Street Address 41 S. High St., Suite 1010		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 7	Y 2	Amount 50.00	
Full Name of Contributor Tuscan Group - Eric Ward, Partner 100%					Registration Number, if PAC		
Street Address 7075 Riverside Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43016	M 0	D 7	Y 2	Amount 25.00	

* 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)]

Page Total \$ 255.00