



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 Aryeh Alex			Registration Number, if PAC	
Street Address 1852 Harrisburg Pike		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Grove City		State OH	Zip Code 43123	Amount \$ 50.00
Form (Cash, Check, Etc) Check # 125				
Full Name of Contributor Stacie A. Baker			Registration Number, if PAC	
Street Address 1101 Bergenia Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Reynoldsburg		State OH	Zip Code 43068	Amount \$ 25.00
Form (Cash, Check, Etc) Check # 382				
Full Name of Contributor Kevin W. Bayless			Registration Number, if PAC	
Street Address 603 Parsley Place		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Gahanna		State OH	Zip Code 43230	Amount \$ 100.00
Form (Cash, Check, Etc) Check # 6724				
Full Name of Contributor Andrew Eing			Registration Number, if PAC	
Street Address 5013 Giovanni Court		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Grove City		State OH	Zip Code 43123	Amount \$ 50.00
Form (Cash, Check, Etc) Check # 1245				
Full Name of Contributor Michael P. Flynn			Registration Number, if PAC	
Street Address 6137 Blacklick Eastern Road		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05/15/2018
City Pickerington		State OH	Zip Code 43147	Amount \$ 100.00
Form (Cash, Check, Etc) Check # 9784				

* 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
\$ ~~2,140.00~~ 3,590.00

Total Expenditures This Event
\$ 0

Page Total \$ 325.00