## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full	<del></del>		
Citizens for Mingo			
Full Name of Contributor			
Marj Kruse			
Street Address			M D Y Amount
1733 White Rd			0 6 1 5 1 0 \$90.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Grove City	ОН	43123	Check
Full Name of Contributor			
Sunny Cataland			
Street Address			M D Y Amount
6889 Lott Rd		T	0 6 1 5 1 0 \$120.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Sunbury	OH	43074	Check
Full Name of Contributor			
Sharon James	· · · · · · · · · · · · · · · · · · ·		
Street Address			M D Y Amount
8682 Davington Dr	7	la: a 1	0 6 1 5 1 0 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Dublin	ОН	43017	Check
Full Name of Contributor			
Michelle Click		<del></del>	M I D V America
Street Address 8071 Artisan Way			M D Y Amount S40.00
	1	7 in Code	0 6 1 5 1 0 \$40.00 Form (Cash, Check, etc.)
City	Staj te OH	Zip Code	Check
Reynoldsburg Full Name of Contributor	Un	43068	CHECK
Todd Lilley			
Street Address			M D Y Amount
2852 Hampton Rd			0 6 1 5 1 0 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43232	Check
Full Name of Contributor Geoff Smith		<u>'</u>	
Street Address 3578 Sunset Dr			M D M Amount 0 6 1 5 1 0 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43221	Check
The above are employees of a unit or department under	, who currently holds the public office		
of County Auditor . I hereby affirm that each contribution was voluntarily made.			
(Signature of Treasurer or Deputy Treasurer)			

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from No. 31-G."

\$370.00
Page Total \$