

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Lori M. Tyack												
Full Name of Contributor Obie D. Lucas												
Street Address 175 Westview Avenue				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$250.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$250.00
M	D	Y	Amount									
0	9	0910	\$250.00									
City Columbus	State OH	Zip Code 43214	Form (Cash, Check, etc.) Check									
Full Name of Contributor Rhonda E Ferguson												
Street Address 2336 Willowside Lane				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$125.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$125.00
M	D	Y	Amount									
0	9	0910	\$125.00									
City Grove City	State OH	Zip Code 43213	Form (Cash, Check, etc.) Check									
Full Name of Contributor Robyn E Johnson												
Street Address 418 Highmeadows Village Dr				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$100.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$100.00
M	D	Y	Amount									
0	9	0910	\$100.00									
City Powell	State OH	Zip Code 43065	Form (Cash, Check, etc.) Check									
Full Name of Contributor Sancha M Young												
Street Address 1186 Lawrence Drive				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$25.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$25.00
M	D	Y	Amount									
0	9	0910	\$25.00									
City Columbus	State OH	Zip Code 43207	Form (Cash, Check, etc.) Check									
Full Name of Contributor Judy M Vance												
Street Address 14819 Crownover Mill Rd				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$150.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$150.00
M	D	Y	Amount									
0	9	0910	\$150.00									
City New Holland	State OH	Zip Code 43145	Form (Cash, Check, etc.) Check									
Full Name of Contributor Crystal Renee Ross												
Street Address 5390 Westfall Rd SW				<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Amount</td> </tr> <tr> <td>0</td> <td>9</td> <td>0910</td> <td>\$250.00</td> </tr> </table>	M	D	Y	Amount	0	9	0910	\$250.00
M	D	Y	Amount									
0	9	0910	\$250.00									
City Lancaster	State OH	Zip Code 43130	Form (Cash, Check, etc.) Check									

The above are employees of a unit or department under the direct supervision and control of Lori M. Tyack, who currently holds the public office of Franklin Co. Municipal Clerk. 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 form No. 31-G."

\$900.00

Page Total \$ _____