Committee of the Commit	The state of the s
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Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full		
Citizens for Lori Tyack		The second of th
Full Name of Contributor		
Rhonda Ferguson		
Street Address		M D Y Amount
2336 Willowside Lane		1 0 0 2 0 8 20.00
City	State Zip Code	Form (Cash, Check, etc)
Grove City	O H 43123	Check
Full Name of Contributor		
Carly Albert		M D Y Amount
Street Address		
1569 Mc Spaden Ct	State Zip Code	1 0 0 2 0 8 50.00 Form (Cash, Check, etc)
City	77 42220	Check
Columbus	O H 43228	Check
Full Name of Contributor		
Nathan Sei Akamine		M D Y Amount
Street Address		1 0 0 1 0 8 150.00
844 South Front St.	State Zip Code	Form (Cash, Check, etc)
Calumilare	O H 43206	Check
Columbus Full Name of Contributor		
Robert Nolan Street Address		M D Y Amount
3884 Norbrook Dr		1 0 0 2 0 8 50.00
City	State Zip Code	Form (Cash, Check, etc)
Columbus	O H 43220	Check
Full Name of Contributor		
Ahmed Kasheer		
Street Address		M D Y Amount
5148 Pebble Ln		1 0 0 1 0 8 100.00
City	State Zip Code	Form (Cash, Check, etc)
Columbus	O H 43220	Check
Full Name of Contributor		
Debra Jones		M D Y Amount
Street Address		
3010 Gasmere Ave	2: 0.1	0 9 2 5 0 8 50.00 Form (Cash, Check, etc)
^{City} Columbus	State Zip Code O H 43224	Check
The above are employees of a unit or department under the direct supervision or control of		Lori M. Tyack , who currently holds the public of
of Franklin Co. Muni Clerk Thereby	affirm that each contribution was voluntarily conf Treasurer or Deputy Treasurer)	made.
		그는 그에게 아는 얼마면 가르워보셔요요?
Transfer total employee contributions to Form No. 31-A or 31 contributions from form No. 31-G."	-E, if received at a social or fundraising even	t. Under "Full Name of Contributor" state "Total employee Page Total \$ 120.00