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## **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							
Bob Nolan							
Street Address						Y	Amount
3884 Norbrook Drive							100.00
City	State	Zip Code			sh, Check,	elc)	
Columbus	0 .	H 43220	) 	Cash			
Full Name of Contributor							
Unallocated donation Street Address		<del> </del>		М	D	Y	Amount
				0 9	١,	1 .	0.12
Best Effort City	State	State Zip Code			0 9 sh, Check,	1	0.12
Columbus		H		Cash			
Full Name of Contributor		<u> </u>	<del></del>	Casit			
THIS ENTRY LEFT BLANK INT	ENTIONALL	Ý					
Street Address						Y	Amount
City	State	Zip Code		Form (Ca	sh, Check,	etc)	
Full Name of Contributor							
Loren Ball							
Street Address				M	D	Y	Amount
742 Mohawk Street				0 9	0 9	·	62.50
City	State	Zip Code			sh, Check,	etc)	
Columbus		H 43206	)	Cash			
Full Name of Contributor							
Amal Kasheer Street Address	<del></del>			М	D	Y	Amount
					0 9	Ι.	62.50
5148 Pebble Lane  City State   Zip Code					ish, Check,		02.50
Columbus	01	H 43220	)-2539	Cash			
Full Name of Contributor		<del></del>					
Linda Szymanski							
Street Address						Y	Amount
3884 Norbrook Drive						1 0	60.00
City	State	Zip Code		Form (Ca	ish, Check,	etc)	
Columbus	0	H 43220	)				
The above are employees of a unit or department under the dire	ect supervision or contro	l of	Lori l	M. Туа	ck	, w	ho currently holds the public office
of Franklin Co. Muni Clerk . 1 hereby a	iffirm that each contribut	tion was volunta	rily 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 e	vent. Under "Full N	une of Con	tributor"	state "Tot	al employee
contributions from No. 31-G."						D-	Total \$ COT 40
						l Pag	ge Total \$ 285.12