

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Hawk					
Full Name of Contributor Ed Hauenstein					
Street Address 2926 E Mound St				M 0	D 7
City Columbus				Y 1	Amount \$100.00
State OH		Zip Code 43209		Form (Cash, Check, etc.) Check	
Full Name of Contributor Linda Slagle					
Street Address 600 Sheldon Ave				M 0	D 7
City Columbus				Y 1	Amount \$100.00
State OH		Zip Code 43207		Form (Cash, Check, etc.) Check	
Full Name of Contributor Geoff Smith					
Street Address 3578 Sunset Dr				M 0	D 7
City Columbus				Y 1	Amount \$50.00
State OH		Zip Code 43221		Form (Cash, Check, etc.) Check	
Full Name of Contributor					
Street Address				M	D
City				Y	Amount
State OH		Zip Code		Form (Cash, Check, etc.)	
Full Name of Contributor Total Employee Contributions From Page 77					
Street Address Transferred to Form 31-E				M	D
City				Y	Amount
State OH		Zip Code		Form (Cash, Check, etc.)	
Full Name of Contributor					
Street Address				M	D
City				Y	Amount
State OH		Zip Code		Form (Cash, Check, etc.)	

The above are employees of a unit or department under the direct supervision and control of Daphne Hawk, who currently holds the public office of County Recorder. 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."

\$250.00
Page Total \$