

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Committee for Dewey Stokes			
Full Name of Contributor			
Joni McClellan (Transferred to For 31-E for 11/16/05)			
Street Address			M D Y Amount
44 Tabilore Loops			1 1 1 6 0 5 295.00
City	State	Zip Code	Form (Cash, Check, etc)
Delaware	O H	43015	Check
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)
Full Name of Contributor			
Street Address			
City			State Zip Code Form (Cash, Check, etc)

The above are employees of a unit or department under the direct supervision or control of Dewey R. Stokes, who currently holds the public office of County Commissioner. 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."

Page Total \$ 295.00