

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 4	Y 0	Amount \$100.00
City Columbus	State OH	Zip Code 43209	Form (Cash, Check, etc.) Check				
Full Name of Contributor Kent Trofholz							
Street Address 6767 Fleur Dr				M 0	D 4	Y 1	Amount \$100.00
City Westerville	State OH	Zip Code 43082	Form (Cash, Check, etc.) EFT				
Full Name of Contributor William Lewis							
Street Address 5276 Princeton Ln				M 0	D 4	Y 1	Amount \$50.00
City Groveport	State OH	Zip Code 43125	Form (Cash, Check, etc.) EFT				
Full Name of Contributor							
Street Address				M	D	Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)				
Full Name of Contributor Total Employee Contributions From Page 21							
Street Address Transferred to Form 31-A				M	D	Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)				
Full Name of Contributor							
Street Address				M	D	Y	Amount
City	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] (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 \$