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## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor William J Flaherty		:	÷ .		er era	
Street Address 2081 Tremont Rd		:	M 03	D 29	Y 2012	Amount \$250.00
City Columbus	State OH	Zip Code 43221-423	l '	Form (Cash, Check, etc.) Check		4. V

The above are employees of a unit or department under the direct supervision and control of who currently holds the public office of County Commissioner . I hereby affirm that each contribution was voluntarily made.

| Darren Server | 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 No. 31-G."

Page Total	\$250.00
50	