20

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full				
Citizens for Hawk				
Full Name of Contributor				
Geoffrey Smith				
Street Address				M D Y Amount
3578 Sunset Dr				0 4 0 5 1 2 \$50.00
City	Sta te	Zip Code		Form (Cash, Check, etc.)
Columbus	ОН	43221		Check
Full Name of Contributor				
0				I M L D L V L L
Street Address				M D Y Amount
City	Sta te	Zip Code		Form (Cash, Check, etc.)
	ОН	\perp		
Full Name of Contributor	-			
Total Employee Contributions From Page i9and 20				
Street Address	. —			M D Y Amount
Transferred To Form 31-E				
City	Sta tc	Zip Code		Form (Cash, Check, etc.)
THY 60 . I	ОН			
Full Name of Contributor				,
Street Address				M D Y Amount
City	Sta te	Zip Code	·	Form (Cash, Check, etc.)
_	ОН			
Full Name of Contributor				
Street Address				M D Y Amount
City	Sta te	Zip Code		Form (Cash, Check, etc.)
_	OH		-	
Full Name of Contributor	<u>.1. </u>	1 ; ···=	· · · · · · · · · · · · · · · · · · ·	
Comma Address				M D Y Amount
Street Address				
City	Starte	Zip Code		Form (Cash, Check, etc.)
	OH			
The above are employees of a unit or department under the direct supervision a	and control of D	aphne Hawk		, who currently holds the public office
of County Recorder I hereby affirm that each	contribution was v	voluntarily made.		
Pach (Signature of Treasurer of	or Deputy Treasure	:r)		

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."

\$50.00
Page Total \$