Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Section 1. Full					
Name of Committee in Full		7	/	•	
Connittee for Joseph W Full Name of Contributor	<u>/ , , , , , , , , , , , , , , , , , , ,</u>	C5^	E,		
Michelle Click Street Address				M D Y Amount	
13412 W. Bank Dr.				, , , , , , ,	-00
lCity i	Sta	te	Zip Code	Form (Cash, Check, etc.)	
Millesport	0	4	43046	Check	
Full Name of Contributor					
Geoge Mance Street Address					
				M D Y Amount	1
3741 Kinsey Dr.				050907 35	- 20
Colmbs	Sta	te //	Zip Code 43224	Form (Cash, Check, etc.)	
Full Name of Contributor					
Cindy Hardy Street Address					
				M D Y Amount	
7970 Sethwick Rd.			•		-00
City	Sta	te	Zip Code	Form (Cash, Check, etc.)	
1266	0	H	43016	Check	
Full Name of Contributor	···········				
Teri Fowler					
Street Address				M D Y Amount	
7858 Inis Ct.					7-00
City	Sta		Zip Code	Form (Cash, Check, etc.)	
City Cmal Winchester Full Name of Contributor	0	H	43110	Check	
Koss Chambes Street Address				M D Y Amount	
12364 Thorough-bred Dr.					2-00
City 1	Sta	te	Zip Code	Form (Cash, Check, etc.)	
Pickerinaton	0	1-1	43147	Check	
Full Name of Contributor					
Tina late			- · · · - · · · · · · · · · · · · · · ·		
Street Address				M D Y Amoun	
6356 Kisosa She					5-00
Regaldsha	Sta	te —	Zip Code 43 068	Form (Cash, Check, etc.)	
1-07.07.000	 _		1 11 5		
The above are employees of a unit or department under the direct supervision and control of, who currently holds the public office					
of County Act 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 No. 31-G."