31-G
R.C. 3517.10

Event Date _____
Page _____

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full: Paula Brooks Committee

Full Name of Contributor	Street Address	City	State	Zip Code	M	D	Y	Amount	Form (Cash, Check, etc.)
	See attached list								

The above are employees of a unit or department under the direct supervision and control of Paula Brooks, who currently holds the public office of County Commissioner and 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 $ _____