Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

5				
Name of Committee in Full	/		- / '	
Name of Committee in Full Connittee for Joseph Full Name of Contributor	<u>w.</u>		-s ts	
Ed O'Block Street Address				M D Y Amount
\mathbf{I}				100705 35.00
City BHERRY Ln.	Sta	te	Zip Code	Form (Cash, Check, etc.)
C4.		H	43/23	Check
Full Name of Contributor			10,23	
Jim Johnston				
Carrat A January			·····	M D Y Amount
628 Floeton Ac				100705 35-00
City	Sta	te	Zip Code	Form (Cash, Check, etc.)
bahanna	0	1	43230	Check
Full Name of Contributor				
Laurie Ludlum			· · · · · · · · · · · · · · · · · · ·	
Street Address				M D Y Amount
1615 Under Ct	1 0.1	_	la: o .	100705 35-00
City	Sta		Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			43227	Check
Jakk: Federer				
Street Address				M D Y Amount
3512 Vintage Woods	D-			100705 35.00
City	Sta	te	Zip Code	Form (Cash, Check, etc.)
Hilliad	0	1-1	43026	Check
Full Name of Contributor	·		·	
Vance Cerasini				
Street Address				M D Y Amount
2105 Vadilee Ct.				100705 35-00
City	Stai		Zip Code	Form (Cash, Check, etc.)
Columbe	0	7-1	43228	Check
Full Name of Contributor				
Street Address			*	M D Y Amount
77 M-1/24 Ciada				101105 35.00
City C	Sta	te	Zip Code	Form (Cash, Check, etc.)
Patastala	0	H	43062	Check
1 w 100 1-00 cm				
The above are employees of a unit or department under the direct supervision and control of a sept w. 1=st, who currently holds the public office				
of Carry And For I hereby affirm that each contribution was voluntarily made.				
DO (Signature of Treasurer of				

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 \$ 210-00