Contributors in Officeholder's Employ

	Prescribe	ed by Sec	eretary of State 2/01				
Name of Committee in Full					•		
Citizens for Lori M. Tyack							
Full Name of Contributor		·	<u></u>				
Tommy J McFerin							,
Street Address				М	D	Y	Amount
6815 Refugee Rd.				1 1	1 2		100.00
City	i	ate	Zip Code	ļ .	sh, Check,	etc)	
Pickerington	0	H	43147-8983	Check	ζ		
Full Name of Contributor							
Obie D. Lucas Street Address				M	D	Y	Amount
					$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 2$	1 .	100.00
175 Westview Ave	l Si	ate	Zıp Code	1 1 Form (Ca	sh, Check,		100.00
Columbus	o	Н	43214-1425	Check	•	·	
Full Name of Contributor		1. **	10214-1460	CICCI			
Ahmed Kasheer							
Street Address					D	Y	Amount
5148 Pebble Ln.					1 2	0/9	200.00
City	St	ate	Zıp Code	1 1 Form (Ca	sh, Check,		
Columbus	0	H	43220-2539	Check	ς.		
Full Name of Contributor		'	<u>'</u>				
Matthew J. Pendy							
Street Address				M	D	Y	Amount
123 Bellefield Ave.				1 1	1 2	0 9	100.00
City	St	tate	Zıp Code	Form (Ca	sh, Check,	etc)	
Westerville	0	H	43081	Check	ς		
Full Name of Contributor							
Crystal Ross							
Street Address					D	Y	Amount
5390 Westfall Rd. SW				1 1	1 2		200.00
City	State		Zıp Code	Form (Cash Check, etc)			
Lancaster Full Name of Contributor	0	H	43130	Check	K.	***	
James Brim (Pete) Street Address				М	D	Ÿ	Amount
Best Effort				111	1 2		10.00
Dest Effort City	St	tate	Zip Code	Form (Ca	sh Check,		10.00
				Cash	•		
The above are employees of a unit or department under the direct supervise	non or co	ntrol of	Lorı M	<u> </u>	ck	, w	ho currently holds the public office
of Franklin Co. Muni Clerk I hereby affirm that e	each cont	ribution v	vas voluntarilv made				
(Signature of Treasure	er or Dep	uty Treas	surer)				
Fransfer total employee contributions to Form No 31-A or 31-E, if receive	ed at a so	cial or fu	ndraising event Under "Full Nar	ne of Con	tributor"	state "To	tal employee
			-				

contributions from form No 31-G "