

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Hawk					
Full Name of Contributor Michael Dinga					
Street Address 336 S Columbia Ave		M 0	D 8	Y 0	Amount \$50.00
City Bexley	State OH	Zip Code 43209		Form (Cash, Check, etc.) EFT	
Full Name of Contributor Angie Dorakovska					
Street Address 5590 Concord Hill Dr		M 0	D 8	Y 0	Amount \$25.00
City Columbus	State OH	Zip Code 43213		Form (Cash, Check, etc.) EFT	
Full Name of Contributor Brian Evans					
Street Address 100 Glenmont Ave		M 0	D 8	Y 0	Amount \$50.00
City Columbus	State OH	Zip Code 43214		Form (Cash, Check, etc.) EFT	
Full Name of Contributor Scott Hibbs					
Street Address 1255 N Hamilton Rd		M 0	D 8	Y 0	Amount \$90.00
City Gahanna	State OH	Zip Code 43230		Form (Cash, Check, etc.) EFT	
Full Name of Contributor Charlene Schultheis					
Street Address 6011 Blunden Rd		M 0	D 8	Y 0	Amount \$50.00
City Dublin	State OH	Zip Code 43016		Form (Cash, Check, etc.) EFT	
Full Name of Contributor Kent Trofholz					
Street Address 6767 Fleur Dr		M 0	D 8	Y 0	Amount \$50.00
City Westerville	State OH	Zip Code 43082		Form (Cash, Check, etc.) EFT	

The above are employees of a unit or department under the direct supervision and control of Daphne Hawk, who currently holds the public office of County Recorder. I hereby affirm that each contribution was voluntarily made.

[Signature] (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."

\$315.00

Page Total \$ _____