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## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor William J Flaherty			13 to			or a
Street Address 2081 Tremont Rd			M 10	D 31	Y 2012	Amount \$100.00
City Columbus	State OH	Zip Code 43221-4238	Form (Chec		ieck, etc.)	

The above are employees of a unit or department under the direct supervision and control of who currently holds the public office of County Commissioner. I hereby aftern 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."

Page Total \$100.00