

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Lori M. Tyack						
Full Name of Contributor Edwin L. Saeger						
Street Address 11425 Taylor Road			M	D	Y	Amount
			0	9	2	100.00
City Plain City		State O H	Zip Code 43064		Form (Cash, Check, etc) Check	
Full Name of Contributor Judy Vance						
Street Address 14819 Crownover Mill Road			M	D	Y	Amount
			1	0	0	88.00
City New Holland		State O H	Zip Code 43145		Form (Cash, Check, etc) Check	
Full Name of Contributor Sancha M. Young						
Street Address 1186 Lawrence Dr			M	D	Y	Amount
			1	0	0	44.00
City Columbus		State O H	Zip Code 43207		Form (Cash, Check, etc) Check	
Full Name of Contributor Robin Caplinger						
Street Address 5087 Gunston Dr			M	D	Y	Amount
			0	9	2	44.00
City Columbus		State O H	Zip Code 43232		Form (Cash, Check, etc) Check	
Full Name of Contributor						
Street Address			M	D	Y	Amount
City		State	Zip Code		Form (Cash, Check, etc)	
Full Name of Contributor						
Street Address			M	D	Y	Amount
City		State	Zip Code		Form (Cash, Check, etc)	

The above are employees of a unit or department under the direct supervision or control of _____, who currently holds the public office

of _____. I 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 \$ 276.00