

# Ohio Campaign Finance Report

FILED

Prescribed by Secretary of State 3/05

10 APR 22 PM 12:21

Full Name of Committee <b>Citizens for Mingo</b>						Registration Number, if PAC <b>FRANKLIN COUNTY BOARD OF ELECTIONS</b>			
Full Name of Candidate <b>Clarence E. Mingo</b>									
Street Address <b>8406 Leisner Ave</b>					Office Sought <b>County Auditor</b>		District		
City <b>New Albany</b>						State <b>OH</b>	Zip Code <b>43054</b>		
Type of Report (place X to the left of report type)	<input checked="" type="checkbox"/>	Pre-Primary	<input type="checkbox"/>	Post-Primary	<input type="checkbox"/>	Pre-General	<input type="checkbox"/>	Post-General	Annual Year
		July Monthly		August Monthly		September Monthly		Termination	Semiannual
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		0 <sup>M</sup> 5	0 <sup>D</sup> 4	1 <sup>Y</sup> 0

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box  No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	\$54,257.79
2. Total monetary contributions (From Form No. 31-A)	\$	\$32,170.00
3. Total other income (From Form No. 31-A-2)	\$	.
4. Total funds available (sum of lines 1, 2, 3)	\$	\$86,427.79
5. Total monetary expenditures (From Form No. 31-B)	\$	\$23,222.36
6. Balance on hand (line 4 minus line 5)	\$	\$63,205.43
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	.
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	.
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	.
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	.
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	.
12. Value of independent expenditures made (From Form No. 31-U)	\$	.
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	.

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Ross A. Chambers, Treasurer



04/21/10

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution pages 27

Expenditure pages 8

Other pages 12

Total pages 47

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>							
Full Name of Contributor <b>Contributions From Form 31-E</b>						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount <b>\$27,295.00</b>	
Full Name of Contributor <b>Contributions From Form 31-E</b>						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount <b>\$4,875.00</b>	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Citizens for Mingo													
To Whom Paid							M	D	Y	Amount			
Matt Borges							0	1	0	4	1	0	\$2,500.00
Address				Purpose									
845 S Third St				Consulting									
City			State	Zip Code		Check Number							
Columbus			OH	43206		1007							
To Whom Paid							M	D	Y	Amount			
O'Charleys							0	1	0	6	1	0	\$5.68
Address				Purpose									
1657 Stringtown Rd				Campaign Meeting Expenses									
City			State	Zip Code		Check Number							
Grove City			OH	43123		Debit Card							
To Whom Paid							M	D	Y	Amount			
Martin Luther King Breakfast Committee							0	1	1	2	1	0	\$350.00
Address				Purpose									
867 Mt Vernon Ave				Tickets-3/19 Event									
City			State	Zip Code		Check Number							
Columbus			OH	43203		1044							
To Whom Paid							M	D	Y	Amount			
AVI Foodsystems							0	1	1	3	1	0	\$8.90
Address				Purpose									
2590 Elm Rd				Campaign Meeting Expenses									
City			State	Zip Code		Check Number							
Warren			OH	44483		Debit Card							
To Whom Paid							M	D	Y	Amount			
Postmaster							0	1	2	1	1	0	\$440.00
Address				Purpose									
850 Twin Rivers Dr				Postage									
City			State	Zip Code		Check Number							
Columbus			OH	43215		1008							
To Whom Paid							M	D	Y	Amount			
Walgreens							0	1	2	6	1	0	\$8.53
Address				Purpose									
3583 E Broad St				Misc Supplies									
City			State	Zip Code		Check Number							
Columbus			OH	43213		Debit Card							
To Whom Paid							M	D	Y	Amount			
The Clarmont							0	1	2	7	1	0	\$24.95
Address				Purpose									
684 S High St				Campaign Meeting Expenses									
City			State	Zip Code		Check Number							
Columbus			OH	43215		Debit Card							
To Whom Paid							M	D	Y	Amount			
Matt Borges							0	1	2	8	1	0	\$2,500.00
Address				Purpose									
845 S Third St				Consulting									
City			State	Zip Code		Check Number							
Columbus			OH	43206		1009							

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full												
Citizens for Mingo												
To Whom Paid						M	D	Y	Amount			
The Clarmont						0	2	0	3	1	0	\$16.01
Address			Purpose									
684 S High St			Campaign Meeting Expenses									
City		State	Zip Code		Check Number							
Columbus		OH	43215		Debit Card							
To Whom Paid						M	D	Y	Amount			
Panera Bread						0	2	0	5	1	0	\$10.63
Address			Purpose									
1307 Grandview Ave			Campaign Meeting Expenses									
City		State	Zip Code		Check Number							
Columbus		OH	43212		Debit Card							
To Whom Paid						M	D	Y	Amount			
Home Town Buffet						0	2	0	8	1	0	\$19.18
Address			Purpose									
3727 Park Mill Dr			Campaign Meeting Expenses									
City		State	Zip Code		Check Number							
Hilliard		OH	43026		Debit Card							
To Whom Paid						M	D	Y	Amount			
Mitchells						0	2	0	9	1	0	\$56.57
Address			Purpose									
45 N Third St			Campaign Meeting Expenses									
City		State	Zip Code		Check Number							
Columbus		OH	43215		Debit Card							
To Whom Paid						M	D	Y	Amount			
Starbucks						0	2	0	9	1	0	\$2.55
Address			Purpose									
220 Market St			Campaign Meeting Expenses									
City		State	Zip Code		Check Number							
New Albany		OH	43054		Debit Card							
To Whom Paid						M	D	Y	Amount			
Huntington National Bank						0	2	0	9	1	0	\$28.97
Address			Purpose									
7 Easton Oval			Service Charge									
City		State	Zip Code		Check Number							
Columbus		OH	43218		EFT							
To Whom Paid						M	D	Y	Amount			
Brian Katz						0	2	1	0	1	0	\$1,000.00
Address			Purpose									
4727 Heathstead Dr			Consulting									
City		State	Zip Code		Check Number							
Dublin		OH	43016		1045							
To Whom Paid						M	D	Y	Amount			
Huntington National Bank						0	2	1	6	1	0	\$27.26
Address			Purpose									
7 Easton Oval			Service Charge									
City		State	Zip Code		Check Number							
Columbus		OH	43218		EFT							

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Citizens for Mingo													
To Whom Paid							M	D	Y	Amount			
AVI Foodsystems							0	2	1	6	1	0	\$8.95
Address				Purpose									
2590 Elm Rd				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
Warren		OH		44483		Debit Card							
To Whom Paid							M	D	Y	Amount			
COSI							0	2	1	6	1	0	\$2.98
Address				Purpose									
2212 E Main St				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
Columbus		OH		43209		Debit Card							
To Whom Paid							M	D	Y	Amount			
Franklin County Board of Elections							0	2	1	9	1	0	\$80.00
Address				Purpose									
280 E Broad St				Filing Fee									
City		State		Zip Code		Check Number							
Columbus		OH		43215		1046							
To Whom Paid							M	D	Y	Amount			
Delta Sigma Theta Sorority							0	2	1	9	1	0	\$120.00
Address				Purpose									
P O Box 329063				Contribution									
City		State		Zip Code		Check Number							
Columbus		OH		43232		1048							
To Whom Paid							M	D	Y	Amount			
Mailchimp							0	2	2	2	1	0	\$30.00
Address				Purpose									
512 Means St				E-Mail Service									
City		State		Zip Code		Check Number							
Atlanta		GA		30318		EFT							
To Whom Paid							M	D	Y	Amount			
Starbucks							0	2	2	2	1	0	\$4.85
Address				Purpose									
220 Market St				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
New Albany		OH		43054		Debit Card							
To Whom Paid							M	D	Y	Amount			
AVI Foodsystems							0	2	2	2	1	0	\$286.83
Address				Purpose									
2590 Elm Rd				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
Warren		OH		44483		1049							
To Whom Paid							M	D	Y	Amount			
Interdenominational Ministerial Alliance							0	2	2	4	1	0	\$325.00
Address				Purpose									
3480 Refugee Rd				Program Ad									
City		State		Zip Code		Check Number							
Columbus		OH		43232		1047							

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full				M	D	Y	Amount
Citizens for Mingo				0	2	4	\$47.50
To Whom Paid							
Classics Pizza				0	2	1	
Address		Purpose					
543 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid							
The Clarmont				0	2	5	\$13.61
Address		Purpose					
684 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid							
The Westin				0	2	5	\$5.20
Address		Purpose					
310 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid							
The Clarmont				0	2	6	\$13.61
Address		Purpose					
684 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid							
AVI Foodsystems				0	2	6	\$4.25
Address		Purpose					
2590 Elm Rd		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Warren	OH	44483	Debit Card				
To Whom Paid							
Postmaster				0	2	6	\$440.00
Address		Purpose					
850 Twin Rivers Dr		Postage					
City	State	Zip Code	Check Number				
Columbus	OH	43215	1011				
To Whom Paid							
Classics Pizza				0	2	6	\$300.00
Address		Purpose					
543 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	1010				
To Whom Paid							
Beverlyn Harvey				0	3	1	\$250.00
Address		Purpose					
2050 Hughey Dr		Consulting					
City	State	Zip Code	Check Number				
Reynoldsburg	OH	43068	1050				

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Citizens for Mingo													
To Whom Paid							M	D	Y	Amount			
Huntington National Bank							0	3	0	2	1	0	\$97.72
Address				Purpose									
7 Easton Oval				Check Printing									
City		State		Zip Code		Check Number							
Columbus		OH		43218		EFT							
To Whom Paid							M	D	Y	Amount			
Postmaster							0	3	0	3	1	0	\$132.00
Address				Purpose									
850 Twin Rivers Dr				Postage									
City		State		Zip Code		Check Number							
Columbus		OH		43215		1012							
To Whom Paid							M	D	Y	Amount			
New Century Solutions							0	3	0	3	1	0	\$3,000.00
Address				Purpose									
5466 Cedar Bush Rd				Consulting									
City		State		Zip Code		Check Number							
Columbus		OH		43229		1013							
To Whom Paid							M	D	Y	Amount			
Brian Katz							0	3	0	3	1	0	\$1,000.00
Address				Purpose									
4727 Heathstead Dr				Consulting									
City		State		Zip Code		Check Number							
Dublin		OH		43016		1014							
To Whom Paid							M	D	Y	Amount			
The Clarmont							0	3	0	5	1	0	\$51.88
Address				Purpose									
684 S High St				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
Columbus		OH		43215		Debit Card							
To Whom Paid							M	D	Y	Amount			
The Clarmont							0	3	0	8	1	0	\$42.41
Address				Purpose									
684 S High St				Campaign Meeting Expenses									
City		State		Zip Code		Check Number							
Columbus		OH		43215		Debit Card							
To Whom Paid							M	D	Y	Amount			
Franklin County Republican Party							0	3	1	0	1	0	\$500.00
Address				Purpose									
14 E Gay St				Tickets-3/10 Event									
City		State		Zip Code		Check Number							
Columbus		OH		43215		2001							
To Whom Paid							M	D	Y	Amount			
2B Printed							0	3	1	2	1	0	\$759.83
Address				Purpose									
70 S Fourth St				Printing									
City		State		Zip Code		Check Number							
Columbus		OH		43215		2002							

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Citizens for Mingo							
To Whom Paid				M	D	Y	Amount
Redi Quik Signs				0	3	1	\$76.86
Address		Purpose					
226 E State St		Signs					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid				M	D	Y	Amount
Huntington National Bank				0	3	1	\$60.09
Address		Purpose					
7 Easton Oval		Service Charge					
City	State	Zip Code	Check Number				
Columbus	OH	43218	EFT				
To Whom Paid				M	D	Y	Amount
Office Max				0	3	1	\$161.08
Address		Purpose					
3826 Morse Rd		Misc. Supplies					
City	State	Zip Code	Check Number				
Columbus	OH	43219	Debit Card				
To Whom Paid				M	D	Y	Amount
Center for Urban Progress				0	3	1	\$50.00
Address		Purpose					
1947 College Rd		Ticket-3/19 Event					
City	State	Zip Code	Check Number				
Columbus	OH	43210	2003				
To Whom Paid				M	D	Y	Amount
Mailchimp				0	3	2	\$30.00
Address		Purpose					
512 Means St		E Mail Service					
City	State	Zip Code	Check Number				
Atlanta	GA	30318	EFT				
To Whom Paid				M	D	Y	Amount
Staples				0	3	2	\$97.10
Address		Purpose					
1739 Stringtown Rd		Misc Supplies					
City	State	Zip Code	Check Number				
Grove City	OH	43123	Debit Card				
To Whom Paid				M	D	Y	Amount
The Clarmont				0	3	2	\$13.94
Address		Purpose					
684 S High St		Campaign Meeting Expenses					
City	State	Zip Code	Check Number				
Columbus	OH	43215	Debit Card				
To Whom Paid				M	D	Y	Amount
Franklin County Republican Party				0	3	3	\$50.00
Address		Purpose					
14 E Gay St		Ticket-3/23 Luncheon					
City	State	Zip Code	Check Number				
Columbus	OH	43215	2004				

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Citizens for Mingo</b>						
To Whom Paid <b>Angie Musselman</b>			M	D	Y	Amount
			0	4	0	\$40.00
Address <b>12999 Ridgeway Rd</b>		Purpose <b>Reimbursement-Filing Fee</b>				
City <b>Orient</b>	State <b>OH</b>	Zip Code <b>43146</b>	Check Number <b>2006</b>			
To Whom Paid <b>Calico, c/o Bucks for Bones</b>			M	D	Y	Amount
			0	4	0	\$70.00
Address <b>1500 Pinnacle Club Dr</b>		Purpose <b>Tickets- 4/16 Event</b>				
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Check Number <b>2007</b>			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State <b>OH</b>	Zip Code	Check Number			

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Citizens for Mingo						
Full Name of Contributor			Registration Number, if PAC			
Harris, McClellan, Binau & Cox c/o Ralph Dill						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
37 W Broad St			0	2	1	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43215	Check			
Full Name of Contributor			Registration Number, if PAC			
Harris, McClellan, Binau & Cox c/o Dan Binau						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
37 W Broad St			0	2	1	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43215	Check			
Full Name of Contributor			Registration Number, if PAC			
Karin Andres						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
1557 Lafayette Dr			0	2	1	\$40.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43220	Check			
Full Name of Contributor			Registration Number, if PAC			
Jim Magnuson						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
570 Polaris Parkway			0	2	2	\$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Westerville	OH	43082	Check			
Full Name of Contributor			Registration Number, if PAC			
Gary Baas						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
959 Maebelle Way			0	2	2	\$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Westerville	OH	43081	Check			
Full Name of Contributor			Registration Number, if PAC			
Jeff Edwards						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
495 S High St			0	2	2	\$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43215	Check			
Full Name of Contributor			Registration Number, if PAC			
Richard Talbott						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
4236 Shire Cove Rd			0	2	2	\$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Hilliard	OH	43026	Check			

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$	\$4,240.00
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## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor		Registration Number, if PAC	
Philip Collins			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
32 E State St		0 2	2 4 1 0 \$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Brian Barker			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
1698 Berkshire Rd		0 2	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43221	Check
Full Name of Contributor		Registration Number, if PAC	
Mark Arnold			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
1400 Haft Dr		0 2	2 4 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Reynoldsburg	OH	43068	Check
Full Name of Contributor		Registration Number, if PAC	
Alex Tornero			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
7716 Critwell Ct		0 3	0 5 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Reynoldsburg	OH	43068	Check
Full Name of Contributor		Registration Number, if PAC	
Eric Laeuffer			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
13831 Sunladen Dr		0 3	0 5 1 0 \$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Pickerington	OH	43147	Check
Full Name of Contributor		Registration Number, if PAC	
Charles Griffith			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
522 N State St		0 3	1 0 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43082	Check
Full Name of Contributor		Registration Number, if PAC	
Celia Forker			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
1942 Stelzer Rd		0 3	1 0 1 0 \$40.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43219	Check

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ <u>\$2,540.00</u>
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# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC			
Citizens for Mingo							
Full Name of Contributor		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Bill Curlis				0	3	10	\$100.00
Street Address		City		Form (Cash, Check, etc.)			
865 Macon Alley		Columbus		Check			
State		Zip Code					
OH		43206					
Full Name of Contributor				Registration Number, if PAC			
Thomas Gross							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2531 Abington Rd				0	3	10	\$250.00
City		Form (Cash, Check, etc.)					
Columbus		Check					
State		Zip Code					
OH		43221					
Full Name of Contributor				Registration Number, if PAC			
Glenn Alban							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
7100 N High St				0	3	10	\$150.00
City		Form (Cash, Check, etc.)					
Worthington		Check					
State		Zip Code					
OH		43085					
Full Name of Contributor				Registration Number, if PAC			
Mike Kibbey							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
319 Thurman Ave				0	3	10	\$50.00
City		Form (Cash, Check, etc.)					
Columbus		Cash					
State		Zip Code					
OH		43206					
Full Name of Contributor				Registration Number, if PAC			
Karin Andres							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1557 Lafayette Dr				0	3	10	\$35.00
City		Form (Cash, Check, etc.)					
Columbus		Check					
State		Zip Code					
OH		43220					
Full Name of Contributor				Registration Number, if PAC			
Rose Duvuvei							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2685 Royal Dornoch Circle				0	3	10	\$100.00
City		Form (Cash, Check, etc.)					
Delaware		Check					
State		Zip Code					
OH		43015					
Full Name of Contributor				Registration Number, if PAC			
Mike Falleur							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1625 Bethel Rd				0	3	10	\$100.00
City		Form (Cash, Check, etc.)					
Columbus		Check					
State		Zip Code					
OH		43220					

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$	\$785.00
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## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor		Registration Number, if PAC	
H Burkley Showe			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
45 N Fourth St		0 3	1 9 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Jeff Glavan			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
92 Hanford St		0 3	1 9 1 0 \$300.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43206	Check
Full Name of Contributor		Registration Number, if PAC	
Matthew Mnich			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
7895 Silver Lake Ct		0 3	1 9 1 0 \$300.00
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43082	Check
Full Name of Contributor		Registration Number, if PAC	
A Eric George			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
4271 Mumford Dr		0 3	1 9 1 0 \$20.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43220	Check
Full Name of Contributor		Registration Number, if PAC	
Dana Rinehart			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
300 E Broad St		0 3	1 9 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Edward Carey			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
140 E Town St		0 3	1 9 1 0 \$200.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Karen H Phipps			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
4333 Reed Rd		0 3	1 9 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43220	Check

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ <u>\$1,170.00</u>
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## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Citizens for Mingo						
Full Name of Contributor			Registration Number, if PAC			
Dorothy Teater						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
3272 Cleeve Hill			0	3	1	\$150.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Dublin	OH	43017	Check			
Full Name of Contributor			Registration Number, if PAC			
Thomas Flesch						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
595 Cardinal Hill Ln			0	3	1	\$150.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Powell	OH	43065	Check			
Full Name of Contributor			Registration Number, if PAC			
Robert Williams						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
7188 Pebble Way Ct			0	3	1	\$10.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Worthington	OH	43235	Check			
Full Name of Contributor			Registration Number, if PAC			
William Fennell						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
943 Norway Dr			0	3	2	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43221	Check			
Full Name of Contributor			Registration Number, if PAC			
John Blommel						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
9012 Kilbourne Rd			0	3	2	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Sunbury	OH	43074	Check			
Full Name of Contributor			Registration Number, if PAC			
Ed Overmyer						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
2245 North Bank Dr			0	3	2	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43220	Check			
Full Name of Contributor			Registration Number, if PAC			
Matt Borges						
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
259 Preston Rd			0	3	2	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43209	Check			

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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	Page Total \$ <b>\$660.00</b>
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## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC			
Citizens for Mingo							
Full Name of Contributor Jonathan Downes				Registration Number, if PAC			
Street Address 400 S Fifth St		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$150.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			
Full Name of Contributor Tim Bainbridge				Registration Number, if PAC			
Street Address 580 S High St		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$150.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			
Full Name of Contributor Madison & Rosan LLP PAC				Registration Number, if PAC OH1248			
Street Address 39 E Whittier St		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$1,000.00
City Columbus		State OH	Zip Code 43206	Form (Cash, Check, etc.) Check			
Full Name of Contributor Charles Bluestone				Registration Number, if PAC			
Street Address 7485 Tottenham Pl		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$100.00
City New Albany		State OH	Zip Code 43054	Form (Cash, Check, etc.) Check			
Full Name of Contributor AFPD Ohio PAC				Registration Number, if PAC CP1331			
Street Address 30415 W 13 Mile Rd		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$300.00
City Farmington Hills		State MI	Zip Code 48334	Form (Cash, Check, etc.) Check			
Full Name of Contributor Michael Sliemers				Registration Number, if PAC			
Street Address 3430 Fishinger Mill Dr		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$150.00
City Hilliard		State OH	Zip Code 43026	Form (Cash, Check, etc.) Check			
Full Name of Contributor VSSP Advocates for Effective Government				Registration Number, if PAC OH108			
Street Address 52 E Gay St		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2410	\$1,000.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			

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Total contributions this event

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Total expenditures this event.

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Page Total \$	\$2,850.00
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## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Citizens for Mingo						
Full Name of Contributor BIA Build PAC of Central Ohio			Registration Number, if PAC OH135			
Street Address 495 Executive Campus Dr	Employer/Occupation/Labor Organization*		M	D	Y	Amount
			0	3	2	\$500.00
City Westerville	State OH	Zip Code 43082	Form (Cash, Check, etc.) Check			
Full Name of Contributor W Gary Robson			Registration Number, if PAC			
Street Address 7000 Scioto Rd			M	D	Y	Amount
			0	3	2	\$150.00
City Dublin	State OH	Zip Code 43017	Form (Cash, Check, etc.) Check			
Full Name of Contributor Oliver Moore			Registration Number, if PAC			
Street Address 4440 Blythe Rd			M	D	Y	Amount
			0	3	2	\$50.00
City Columbus	State OH	Zip Code 43224	Form (Cash, Check, etc.) Cash			
Full Name of Contributor Central Ohio Realtors PAC			Registration Number, if PAC CP401			
Street Address 2700 Airport Dr			M	D	Y	Amount
			0	3	2	\$600.00
City Columbus	State OH	Zip Code 43219	Form (Cash, Check, etc.) Check			
Full Name of Contributor Marianne Collins			Registration Number, if PAC			
Street Address 423 Hickory Ln			M	D	Y	Amount
			0	3	2	\$200.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, etc.) Check			
Full Name of Contributor A J Myers			Registration Number, if PAC			
Street Address 384 Eastmoor Blvd			M	D	Y	Amount
			0	3	2	\$150.00
City Columbus	State OH	Zip Code 43209	Form (Cash, Check, etc.) Check			
Full Name of Contributor Jerry McAfee			Registration Number, if PAC			
Street Address 2145 Keltshire Ave			M	D	Y	Amount
			0	3	2	\$100.00
City Columbus	State OH	Zip Code 43229	Form (Cash, Check, etc.) Check			

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$	\$1,750.00
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# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor		Registration Number, if PAC	
Civil Engineers for Civil Government		CO449736	
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
12855 Wheaton Ave		0 3	2 4 1 0 \$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Pickerington	OH	43147	Check
Full Name of Contributor		Registration Number, if PAC	
Calvin Taylor			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
701 Morning St		0 3	2 4 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Worthington	OH	43085	Check
Full Name of Contributor		Registration Number, if PAC	
Mark Snider			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
815 Ebner St		0 3	2 4 1 0 \$50.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43206	Check
Full Name of Contributor		Registration Number, if PAC	
Ashland Inc Ohio PAC		CP119	
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
5200 Blazer Parkway		0 3	2 4 1 0 \$300.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dublin	OH	43017	Check
Full Name of Contributor		Registration Number, if PAC	
Carlile, Patchen, & Murphy			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
366 E Broad St		0 3	2 4 1 0 \$200.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Thomas Horner			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
9417 Avemore Ct		0 3	2 4 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dublin	OH	43017	Check
Full Name of Contributor		Registration Number, if PAC	
John Brandt			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
5187 Smothers Rd		0 3	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Westerville	OH	43081	Check

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$	\$1,950.00
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# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor		Registration Number, if PAC	
Vesna Mangano			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
56 N Parkview Ave		0 3	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43209	Check
Full Name of Contributor		Registration Number, if PAC	
Edwin Carr			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
6088 Nicholas Glen		0 3	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43213	Check
Full Name of Contributor		Registration Number, if PAC	
Stanford Ackley			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
695 Kenwick Rd		0 3	2 4 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43209	Check
Full Name of Contributor		Registration Number, if PAC	
Samuel Koon			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
141 E Town St		0 3	2 4 1 0 \$300.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor		Registration Number, if PAC	
Joseph Armeni			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
295 W 4th Ave		0 3	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43201	Check
Full Name of Contributor		Registration Number, if PAC	
Jerry Jordan			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
795 Old Woods Rd		0 3	2 4 1 0 \$150.00
City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43235	Check
Full Name of Contributor		Registration Number, if PAC	
Ronald Sabatino			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
3895 Stoneridge Ln		0 3	2 4 1 0 \$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dublin	OH	43017	Check

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Total contributions this event

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Total expenditures this event.

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Page Total \$ 1,000.00

