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Statement of Contributions Received

Form 31-A

ORC 3517 10

Full Name of Committee					ORC 3517.10
Citizens for Mingo					
Full Name of Contributor Registration No					per, if PAC
Total Contributions From Form 31-E			,		••••••••••••••••••••••••••••••••••••••
Street Address	Employ	yer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	State Zip Code Date (MM/DD/YYYY)		iDWW)	Amount
	ОН		Date (mm.)	04/19/2018	
Full Name of Contributor				Registration Number	er, if PAC
Total Contributions From Form 31-E			1		
Street Address	Employ [,]	er/Occupation/Lab	or Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DE	D/YYY)	Amount
	ОН			06/13/2018	
Full Name of Contributor				Registration Number	er, if PAC
Total Contributions From Form 31-E					•
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD	DYYYY)	Amount
	ОН			07/26/2018	2,800.00
Full Name of Contributor		<u></u>		Registration Numbe	er, if PAC
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD) /////	Amount
Full Name of Contributor Registration				Registration Numbe	er, if PAC
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD)/YYYY)	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)]

Page	Total	12,600.00	