

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>						
Full Name of Contributor <b>Collins &amp; Slagle LPA; c/o Phil Collins</b>				Registration Number, if PAC		
Street Address <b>21 E State St</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$1,000.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Shirley Stevens</b>				Registration Number, if PAC		
Street Address <b>5763 Paul Talbott Cir</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Jessica Wilkins - Bibbs</b>				Registration Number, if PAC		
Street Address <b>5660 Montevideo Dr</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Baker &amp; Hostetter PAC</b>				Registration Number, if PAC <b>OH125</b>		
Street Address <b>1900 E 9th St</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$250.00</b>
City <b>Cleveland</b>	State <b>OH</b>	Zip Code <b>44114</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Pat Kelley</b>				Registration Number, if PAC		
Street Address <b>2712 Bexley Park Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$250.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Robert Behal</b>				Registration Number, if PAC		
Street Address <b>2531 Brentwood Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$250.00</b>
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Tim Pirtle</b>				Registration Number, if PAC		
Street Address <b>3464 Tremont Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Amount <b>\$250.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>			

\* 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

Total expenditures this event.