## **Statement of Contributions Received**



Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Tom Francis			Registration Number, if P	AC
Street Address 2170 Dividend Dr	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43228	1 0 1 8 1 0	Amount \$150.00
Full Name of Contributor Randy Best			Registration Number, if P	AC
Street Address 10035 Juliana Circle	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	M D Y O	Amount \$50.00
Full Name of Contributor Harris McClellan Binau & Cox: c/o Dan Binau				AC
Street Address 37 W Broad St	Employer/Occu	pation/Labor Organization®	*	Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	1 0 1 8 1 0	Amount \$100.00
Full Name of Contributor Registration Number, if PAC  Gerald Hinkle				
Street Address P O Box 20246	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	M D Y	Amount \$200.00
Full Name of Contributor Registration Number, if PAC  Amy Shepherd				
Street Address 3929 Village Club Dr	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	1 0 1 8 1 0	Amount \$100.00
Full Name of Contributor  Daniel Gunsett  Registration Number, if				AC
Street Address 847 Robbins Way	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	M D Y 1 8 1 0	Amount \$100.00
Full Name of Contributor Registration Number, if  Edward Bernert				
Street Address 2695 Welsford Rd	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	M, D, Y, 1 8 1 0	Amount \$50.00
Full Name of Contributor Andrew Ferris			Registration Number, if P.	
Street Address 3941 Fairlington Dr	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	M D Y 1 0 1 8 1 0	Amount \$50.00

Page Total \$800.00

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)]