



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Mingo				
Full Name of Contributor John Johnson			Registration Number, if PAC	
Street Address 4319 Laux Link Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 10/18/2018	Amount 250.00
Full Name of Contributor Steve Boone			Registration Number, if PAC	
Street Address 5393 Club Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/18/2018	Amount 500.00
Full Name of Contributor Robert Benavent			Registration Number, if PAC	
Street Address 199 McKenna Creek Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 10/18/2018	Amount 250.00
Full Name of Contributor Kasich for America			Registration Number, if PAC	
Street Address 4679 Winterset Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/18/2018	Amount 2,500.00
Full Name of Contributor Robert Werth			Registration Number, if PAC	
Street Address 4527 Tavistock Circle		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	Date (MM/DD/YYYY) 10/18/2018	Amount 500.00

*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)]

Page Total 4,000.00