31-E R.C. 3517.10(B)

## **Statement of Contributions Received** at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	1/20/10
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Name of Committee in Full Citizens for Mingo				
Full Name of Contributor  VSSP Advocates for Effective Government			Registration Number, if PAC OH108	
Street Address 52 E Gay St	Employer/Occup	ation/Labor Organization*	M D Y Amount \$1,000.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
ull Name of Contributor			Registration Number, if PAC	
John Barta Jr				
reet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
1824 Barrington Rd			0 1 1 9 1 0 \$100.00	
ity	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43221	Check	
ull Name of Contributor			Registration Number, if PAC	
Bill Adamson				
reet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
10 W Broad St., Suite 2100			0 1 1 9 1 0 \$100.00	
ity	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
ull Name of Contributor			Registration Number, if PAC	
Chuck Griffith				
reet Address	Employer/Occur	oation/Labor Organization*	M D Y Amount	
522 N State St	,	·	0 1 1 9 1 0 \$100.00	
ty	Sta te	Zip Code	Form (Cash, Check, etc.)	
Westerville	ОН	43082	Check	
full Name of Contributor			Registration Number, if PAC	
Jason Lindholm				
treet Address	Employer/Occupation/Labor Organization*		M D Y Amount	
6720 New Albany RD			0 1 1 9 1 0 \$100.00	
Sity	Sta te	Zip Code	Form (Cash, Check, etc.)	
New Albany	OH	43054	Check	
Full Name of Contributor  Laurence Ruben			Registration Number, if PAC	
			M D Y Amount	
treet Address 140 S Columbia Ave	Employer/Occup	pation/Labor Organization*	0 1 1 9 1 0 \$100.00	
	Sta te	Zip Code	Form (Cash, Check, etc.)	
ity Columbus	OH	43209	Check	
			Registration Number, if PAC	
Full Name of Contributor  James Saad			Registration Namoci, if 1780	
			M D Y Amount	
treet Address	Employer/Occu	pation/Labor Organization*	0 1 1 9 1 0 \$100.00	
229 Huber Village Blvd., Suite 130		[7: C.1.		
tity	Sta te	Zip Code 43081	Form (Cash, Check, etc.) Check	
Westerville	OH			
Required for contributions from individuals over \$100 to she individual's business, if any, rather than employer should abor organization of which the employees are members, if the boxes below only on the last page for this event.	d be listed. If two or mo any, must also appear. [	re employees contribute via pag R.C. 3517.10(B)(4)]	yroll deduction and exceed the aggregate of \$100	
the date column				
	The last the state of the state			
otal contributions this event	Total expenditures this event.			
1				
			\$1,600	
		<u> </u>	Page Total \$ \$1,000.	