



## Contributors in Officeholder's Employ

Form 31-G  
R.C. 3517.10

## Full Name of Committee

Citizens for Mingo

## Full Name of Contributor

Kim McIlwaine

## Street Address

520 Richwood Dr

Date (MM/DD/YYYY)

04/21/2018

Amount

100.00

## City

Pataskala

State

OH

Zip Code

43062

Form (Cash, Check, etc.)

Check

## Full Name of Contributor

Alande Orelein

## Street Address

5567 Cartwright Ln

Date (MM/DD/YYYY)

04/23/2018

Amount

100.00

## City

Columbus

State

OH

Zip Code

43231

Form (Cash, Check, etc.)

EFT

## Full Name of Contributor

Larry McQuain

## Street Address

6886 Sagestone Dr

Date (MM/DD/YYYY)

04/23/2018

Amount

100.00

## City

Dublin

State

OH

Zip Code

43016

Form (Cash, Check, etc.)

EFT

## Full Name of Contributor

Total Employee Contributions From Pages 55 through 57

## Street Address

Transferred to Form 31-E

Date (MM/DD/YYYY)

Amount

## City

State

OH

Zip Code

Form (Cash, Check, etc.)

The above are employees of a unit or department under the direct supervision and control of Clarence E. Mingo

who currently holds the public office County Auditor

Name of Officeholder

Name of Public Office

I hereby affirm that each contribution was voluntarily made.

(Signature of Treasurer or Deputy Treasurer)

300.00