



**Contributors in Officeholder's Employ**

**Form 31-G**  
R.C. 3517.10

**Full Name of Committee**

Citizens for Mingo

**Full Name of Contributor**

John Price

**Street Address**

2920 Snoufer Rd

**Date (MM/DD/YYYY)**

01/12/2018

**Amount**

100.00

**City**

Columbus

**State**

OH

**Zip Code**

43235

**Form (Cash, Check, etc.)**

Check

**Full Name of Contributor**

George Mance

**Street Address**

3741 Kinsey Dr

**Date (MM/DD/YYYY)**

01/22/2018

**Amount**

50.00

**City**

Columbus

**State**

OH

**Zip Code**

43224

**Form (Cash, Check, etc.)**

EFT

**Full Name of Contributor**

Kimbol Stroud

**Street Address**

947 Chara Ln

**Date (MM/DD/YYYY)**

01/22/2018

**Amount**

100.00

**City**

Columbus

**State**

OH

**Zip Code**

43240

**Form (Cash, Check, etc.)**

EFT

**Full Name of Contributor**

Angie Musselman

**Street Address**

6934 Rothwell St

**Date (MM/DD/YYYY)**

01/26/2018

**Amount**

100.00

**City**

New Albany

**State**

OH

**Zip Code**

43054

**Form (Cash, Check, etc.)**

Check

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)