

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>				
Full Name of Contributor <b>Michael Van Buskirk</b>			Registration Number, if PAC	
Street Address <b>4043 Easton Way</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   1   6   1   3	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43219</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Rinehart Rishel &amp; Cuckler Ltd; c/o Steve Cuckler</b>			Registration Number, if PAC	
Street Address <b>300 E Broad St</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   1   6   1   3	Amount <b>\$1,000.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Eleanor Haynes</b>			Registration Number, if PAC	
Street Address <b>687 Ulverston Dr</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   1   6   1   3	Amount <b>\$150.00</b>
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Keycorp Advocates Fund</b>			Registration Number, if PAC <b>COO073155</b>	
Street Address <b>127 Public Sq</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   1   6   1   3	Amount <b>\$1,000.00</b>
City <b>Cleveland</b>	State <b>OH</b>	Zip Code <b>44114</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Mark Jump</b>			Registration Number, if PAC	
Street Address <b>2130 Arlington Ave</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   1   6   1   3	Amount <b>\$250.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Squire Sanders LLP PAC</b>			Registration Number, if PAC <b>COO444935</b>	
Street Address <b>1200 19th St</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   3   0   1   3	Amount <b>\$200.00</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>JP Morgan Chase &amp; Co PAC</b>			Registration Number, if PAC <b>COO128512</b>	
Street Address <b>10 S Dearborn St</b>	Employer/Occupation/Labor Organization*		M   D   Y 0   9   3   0   1   3	Amount <b>\$250.00</b>
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60603</b>	Form (Cash, Check, etc.) <b>Check</b>	

\* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ **\$2,950.00**