



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Citizens for Mingo				
Full Name of Contributor Linda Wetters			Registration Number, if PAC	
Street Address 1496 Deer Crossing Ln	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 11/02/2018	Amount 250.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43085	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Chris Slagle			Registration Number, if PAC	
Street Address 2635 E Broad St	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 11/07/2018	Amount 500.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43209	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Dave Ciesinski			Registration Number, if PAC	
Street Address 1951 Tremont Rd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 11/07/2018	Amount 100.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43212	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Pat Grabill			Registration Number, if PAC	
Street Address 2970 Arbuckle Rd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 11/08/2018	Amount 250.00
City London	State OH <input type="checkbox"/>	Zip Code 43140	Form (Cash, Check, Etc) Check	
Full Name of Contributor Total Employee Contributions From Form 31-G			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 2,090.00
City	State <input type="checkbox"/>	Zip Code	Form (Cash, Check, Etc)	

* 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
26,370.00

Total Expenditures This Event
0.00

Page Total \$ 3,190.00