

# 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>Isaac, Wiles, Burkholder &amp; Teetor PAC</b>			Registration Number, if PAC <b>CP 1058</b>	
Street Address <b>2 Miranova Pl</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>2</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Pat Grabill</b>			Registration Number, if PAC	
Street Address <b>2970 Arbuckle Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>London</b>	State <b>OH</b>	Zip Code <b>43140</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Steven Gabbe</b>			Registration Number, if PAC	
Street Address <b>297 Stanberry Ave</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Thomas Brigdon</b>			Registration Number, if PAC	
Street Address <b>2416 Commonwealth Pk</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	Y <b>2</b>	Amount <b>\$2,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Dick Talbott</b>			Registration Number, if PAC	
Street Address <b>4236 Shire Cove Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Y <b>2</b>	Amount <b>\$500.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Robert Yoakam</b>			Registration Number, if PAC	
Street Address <b>6345 Taggart Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Delaware</b>	State <b>OH</b>	Zip Code <b>43015</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Sam Koon</b>			Registration Number, if PAC	
Street Address <b>141 E Town St</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>2</b>	Amount <b>\$500.00</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

Total expenditures this event.

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3,550.00
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