

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

Prescribed by Secretary of State 03/05

Event Date 7/30/14

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Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Jesse Thomas			Registration Number, if PAC	
Street Address 7874 Jonell Sq	Employer/Occupation/Labor Organization*		M 0	D 7
City New Albany	State OH	Zip Code 43054	Y 1	Amount \$250.00
Form (Cash, Check, etc.) EFT				
Full Name of Contributor George Babyak			Registration Number, if PAC	
Street Address 8261 Sanctuary Dr	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43235	Y 1	Amount \$500.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Zeiger, Tigges, & Little LLP; c/o Matthew Zeiger			Registration Number, if PAC	
Street Address 41 S High St	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$500.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Wholesale Beer & Wine PAC			Registration Number, if PAC CP127	
Street Address 37 W Broad St	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$1,000.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Tim Pirtle			Registration Number, if PAC	
Street Address 2935 Kenny Rd	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43221	Y 1	Amount \$1,000.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Charles Saxbe			Registration Number, if PAC	
Street Address 65 E State St	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor J Anthony Kington			Registration Number, if PAC	
Street Address 1786 Millwood Dr	Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus	State OH	Zip Code 43221	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				

* 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 \$ **\$3,450.00**