

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens For Mingo				
Full Name of Contributor Pat Bucklew				
Street Address 6567 Sunbury Rd			M 1 0	D 1 4
City Westerville			Y 0 9	Amount \$35.00
State OH	Zip Code 43082	Form (Cash, Check, etc.) Check		
Full Name of Contributor Fred Buttle				
Street Address 1155 S Roosevelt Ave			M 1 0	D 1 4
City Columbus			Y 0 9	Amount \$35.00
State OH	Zip Code 43209	Form (Cash, Check, etc.) Check		
Full Name of Contributor Sunny Cataland				
Street Address 6889 Lott Rd			M 1 0	D 1 4
City Sunbury			Y 0 9	Amount \$70.00
State OH	Zip Code 43074	Form (Cash, Check, etc.) Check		
Full Name of Contributor Vance Cerasini				
Street Address 2105 Jodilee Ct			M 1 0	D 1 4
City Columbus			Y 0 9	Amount \$35.00
State OH	Zip Code 43228	Form (Cash, Check, etc.) Check		
Full Name of Contributor Ross Chambers				
Street Address 12364 Thoroughbred Dr			M 1 0	D 1 4
City Pickerington			Y 0 9	Amount \$100.00
State OH	Zip Code 43147	Form (Cash, Check, etc.) Check		
Full Name of Contributor Michelle Click				
Street Address 8071 Artisan Way			M 1 0	D 1 4
City Reynoldsburg			Y 0 9	Amount \$35.00
State OH	Zip Code 43068	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 of County Auditor. I hereby affirm that each contribution was voluntarily made.

 (Signature of Treasurer or Deputy Treasurer)

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from form No. 31-G."

\$310.00

Page Total \$ _____