



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 Pete Riddell			Registration Number, if PAC	
Street Address 158 Bellefield Ave	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 200.00
City Westerville	State OH <input type="checkbox"/>	Zip Code 43081	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Paula Farrell			Registration Number, if PAC	
Street Address 4035 Appleleaf Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 60.00
City Gahanna	State OH <input type="checkbox"/>	Zip Code 43230	Form (Cash, Check, Etc) Check	
Full Name of Contributor Robertson for Engineer			Registration Number, if PAC	
Street Address 865 Macon Alley	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 5,000.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43206	Form (Cash, Check, Etc) Check	
Full Name of Contributor Prime AE Group of Ohio PAC			Registration Number, if PAC CP178	
Street Address 8415 Pulsar Pl	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 1000.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43240	Form (Cash, Check, Etc) Check	
Full Name of Contributor Robert Benavent			Registration Number, if PAC	
Street Address 199 McKenna Creek Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 750.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43230	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

Total Expenditures This Event

Page Total \$ 7,010.00