31-E R.C. 3517.10(B)

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

Event Date_6/16/11	٦			
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Page Total \$

	Prescribed by Secreta	ary of State 03/03		
Name of Committee in Full Citizens for Mingo				
Full Name of Contributor			Registration Number, if PAC	
Gary Baas				
Street Address	Employer/Occurs	ation/Labor Organization*	M D Y Amount	
959 Maebelle Way	<u> </u>		0 5 1 2 1 1 \$1,000.00	
ity Westerville	Staj te OH	Zip Code 43081	Form (Cash, Check, etc.) Check	
Full Name of Contributor		Registration Number, if PAC		
Ohio Council of Retail Merchants	CP322			
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
50 W Broad St			0 5 1 2 1 1 \$600.00	
ity	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
ull Name of Contributor			Registration Number, if PAC	
Steven Boone				
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
1780 Welsh Hills Rd			0 5 1 2 1 1 \$1,000.00	
ity	Sta te	Zip Code	Form (Cash, Check, etc.)	
Granville	OH	43023	Check	
full Name of Contributor			Registration Number, if PAC	
George Kontogiannis				
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
400 S Fifth St			0 5 1 2 1 1 \$600.00	
ity	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor George Sicaras			Registration Number, if PAC	
Street Address 2988 N High St	Employer/Occup	oation/Labor Organization*	0 5 1 2 1 1 Amount \$600.00	
City Columbus	Starte OH	Zip Code 43202	Form (Cash, Check, etc.) Check	
Full Name of Contributor			Registration Number, if PAC	
Baker & Hostetler PAC			OH125	
Street Address 3200 National City Center	Employer/Occup	pation/Labor Organization*	0 5 1 2 1 1 Amount \$600.00	
City Cleveland	Sta' te OH	Zip Code 44114	Form (Cash, Check, ctc.) Check	
Full Name of Contributor Edward Panos	· · · · · · · · · · · · · · · · · · ·	-	Registration Number, if PAC	
			M D Y Amount	
MOO Standard Close	Employer/Occup	pation/Labor Organization*	0 5 1 2 1 1 \$1,000.00	
4099 Stannage Close	0.2	Zip Code	Form (Cash, Check, etc.)	
New Albany	Stat te OH	43054	Check	
Required for contributions from individuals over \$1 the individual's business, if any, rather than employed labor organization of which the employees are membrial in the boxes below only on the last page for this event to form in the date column	r should be listed. If two or more, if any, must also appear. [!	re employees contribute via pa R.C. 3517.10(B)(4)]	yroll deduction and exceed the aggregate of \$100, t	
Fotal contributions this event		Total expenditures this	event.	
olai conditudions and event				
		'		
			∫ 55,400.0	