Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor			
Larry McQuain			والمحاصره والمناأر والمعاصلين فالمناص والمعاري
Street Address	-		M D Y Amount
6886 Sagestone Dr			1 1 1 9 1 4 \$100.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Dublin	OH	43016	Check
Full Name of Contributor			A page 1 and
Total Employee Contributions From Pag	es 34and 35		
Street Address			M D Y Amount
Transferred to Form 31-E			
City	Sta te	Zip Code	Form (Cash, Check, etc.)
	OH		يسر من يهوه الإياد و
Full Name of Contributor			
Street Address			M D Y Amount
City	Sta te	Zip Code	Form (Cash, Check, etc.)
	OH		
Full Name of Contributor			Section 1997 Section 1997
			A CONTRACTOR OF THE PROPERTY O
Street Address			M D Y Amount
City	Sta te	Zip Code	Form (Cash, Check, etc.)
	OH.		and the
Full Name of Contributor	•		
			and the second s
Street Address			M D Y Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor	i t		
			A THE CONTRACT OF THE CONTRACT
Street Address	<u> </u>		M D Y Amount
City	Sta te	Zip Code	Form (Cash, Check, etc.)
·	OH	·	
The above are employees of a unit or department under the	direct supervision and control of	arence E. Mingo	, who currently holds the public office
County Auditor			, who cantonly notes the paone office
of County Auditor	by affirm that each contribution was v	oluntarily made.	
Welch (Sign	ature of Treasurer or Deputy Treasure	r)	

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 No. 31-G."