31-E R.C. 3517.10(B)

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

Event Date	8/14/13
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Prescribed by Secretary of State 03/05

	Prescribed by Secre	tary of State 03/05			
Name of Committee in Full Citizens for Mingo	•				
	<u></u>				
Full Name of Contributor Timothy McGrath			Registration Number, if PAC		
treet Address			M D Y Amount		
5305 Rocky Creek Dr		nation/Labor Organization*	0 7 1 2 1 3 \$100.00		
ity Grove City	OH Stajite	Zip Code 43123	Form (Cash, Check, etc.) Check		
ull Name of Contributor	· · · · · · · · · · · · · · · · · · ·	Registration Number, if PAC			
Charles Bluestone					
reet Address	Employer/Occur	action/Labor Organization*	M D Y Amount		
7485 Tottenham PI	1	· ·	0 7 1 2 1 3 \$100.00		
ity	Sta te	Zip Code	Form (Cash, Check, etc.)		
New Albany	l OH	43054	Check		
ull Name of Contributor		1	Registration Number, if PAC		
Chester Debellis			, , , , , , , , , , , , , , , , , , ,		
reet Address			M D Y Amount		
3874 Rushmore Dr	Employer/Occur	ation/Labor Organization*	0 7 1 2 1 3 \$50.00		
	CLT:	Izi- Cala			
Columbus	Stajite	Zip Code	Form (Cash, Check, etc.) Check		
Columbus	OH	43220			
ull Name of Contributor			Registration Number, if PAC		
John Haueisen					
reet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount		
587 Fox Ln			0 7 1 2 1 3 \$50.00		
ty	Staj te	Zip Code	Form (Cash, Check, etc.)		
Worthington	ОН	43085	Check		
ull Name of Contributor William Fennell			Registration Number, if PAC		
treet Address	<u> </u>		M. D Yı Amount		
943 Norway Dr	Employer/Occup	nation/Labor Organization*	0 7 1 2 1 3 \$25.00		
ity	Sta te	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH _.	43221	Check		
ull Name of Contributor Richard Talbott			Registration Number, if PAC		
treet Address	Employer/Occup	extion/Labor Organization*	M D Y Amount		
4236 Shire Cove Rd		•	0 7 1 2 1 3 \$1,000.00		
ity	Star te	Zip Code	Form (Cash, Check, etc.)		
Hilliard	OH	43026	Check		
ull Name of Contributor			Registration Number, if PAC		
John Hamlin					
treet Address	lr 1: 20		M D Y Amount		
21 W Broad St	Employer/Occup	ation/Labor Organization*	0 7 1 2 1 3 \$100.00		
	6.2.	7 in Cod-			
ity Columbus	State	Zip Code 43215	Form (Cash, Check, etc.) Check		
	ОН				
ne individual's business, if any, rather than employ abor organization of which the employees are mem	er should be listed. If two or mor nbers, if any, must also appear. [f	e employees contribute via pa	utor is self-employed, the occupation and the name yroll deduction and exceed the aggregate of \$100, the		
Il in the boxes below only on the last page for this ansfer the Total contributions for this event to form the date column	event. n No. 31-A. Under Full Name of	Contributor state "Contribution	ons from form No. 31-E" and list the date of the eve		
otal contributions this event	Total expenditures this event.				
·		'			
			\$1,425.0		
1		<u> </u>	J Page Total \$ 1,425.0		