



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 Anthony Lordo			Registration Number, if PAC	
Street Address 1000 High St	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 250.00
City Worthington	State OH <input type="checkbox"/>	Zip Code 43085	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Phillip Brumbaugh			Registration Number, if PAC	
Street Address 108 Philip Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 20.00
City West Milton	State OH <input type="checkbox"/>	Zip Code 45383	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Dorothy Teater			Registration Number, if PAC	
Street Address 3272 Cleve Hill	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 1000.00
City Dublin	State OH <input type="checkbox"/>	Zip Code 43017	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Gordon Shuler			Registration Number, if PAC	
Street Address 290 Daventry Ct	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 50.00
City Canal Winchester	State OH <input type="checkbox"/>	Zip Code 43110	Form (Cash, Check, Etc) EFT	
Full Name of Contributor Barbara Lach			Registration Number, if PAC	
Street Address 3175 Tremont Rd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/29/2018	Amount 50.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43221	Form (Cash, Check, Etc) EFT	

* 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 \$ 1,370.00