31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	7/30/15
Page	<u>57</u>

Citizens for Mingo			
ull Name of Contributor Dan Muthard	_		Registration Number, if PAC
			
914 Foxtail Circle	Employer/Occupation/Labor Organization*		0 7 1 6 1 5 \$1,000.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
Tipp City	OH	45371	Check
dl Name of Contributor			Registration Number, if PAC
Michael Gonsiorowski			
eet Address	Employer/Occup	oation/Labor Organization*	M. D. Y. Amount
2666 Brentwood Rd			0 7 1 6 1 5 \$100.00
у	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43209	Check
Il Name of Contributor		_	Registration Number, if PAC
Alan Jones		_	
ect Address	Employer/Occup	nation/Labor Organization*	M D Y Amount
P O Box 329			0 7 1 6 1 5 \$500.00
ty	Sta te	Zip Code	Form (Cash, Check, etc.)
Mt Gilead	l oh	43338	Check
II Name of Contributor			Registration Number, if PAC
Collins & Slagle LPA; c/o Philip Collins			
eet Address	Employer/Occupation/Labor Organization*		M D Y _I Amount
21 E State St	Employen	and the contract of the contra	0 7 1 6 1 5 \$100.00
y	Sta' te	Zip Code	Form (Cash, Check, etc.)
, Columbus	οĤ	43215	Check
ill Name of Contributor	1 011	43213	Registration Number, if PAC
John Mahaney			registration (tumber, in 1716
reet Address	Employer/Occur	pation/Labor Organization*	M D Y Amount
50 W Broad St	ismproyer seeap	ALLOW ORGANISMON	0 7 1 6 1 5 \$300.00
ty	Sta' te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
ull Name of Contributor			Registration Number, if PAC
W Keith Stevens			togististi (tantos, 7, 7, 10
reet Address	Employer/Occupation/Labor Organization*		M D Y Amount
1620 E Broad St	Ling, or every	,	0 7 1 6 1 5 \$1,000.00
ty	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43203	Check
ull Name of Contributor			Registration Number, if PAC
William Fennell		,	
reet Address	Em =lanar/O - · · ·	pation/Labor Organization*	M D Y Amount
943 Norway Dr	employer/Occup	benon penon Organization.	0 7 1 6 1 5 \$25.00
	Cem's	Zip Code	Form (Cash, Check, etc.)
ity Columbus	Sta te OH	43221	Check
leavined for contributions from individuals over \$100	to statewide and General As rould be listed. If two or mor	re employees contribute via pa	utor is self-employed, the occupation and the name lyroll deduction and exceed the aggregate of \$100, t
ne individual's business, if any, rather than employer shabor organization of which the employees are members I in the boxes below only on the last page for this ever	s, if any, must also appear. [F nt.		Company of the desired for
the individual's business, if any, rather than employer shabor organization of which the employees are membered in the boxes below only on the last page for this ever ansfer the Total contributions for this event to form Not the date column	s, if any, must also appear. [F nt.		ons from form No. 31-E" and list the date of the even
the individual's business, if any, rather than employer shabor organization of which the employees are membered in the boxes below only on the last page for this ever ansfer the Total contributions for this event to form Not the date column	s, if any, must also appear. [F nt.	Contributor state "Contribution	
ne individual's business, if any, rather than employer shabor organization of which the employees are membered in the boxes below only on the last page for this ever ansfer the Total contributions for this event to form No the date column	s, if any, must also appear. [F nt.		
ne individual's business, if any, rather than employer shabor organization of which the employees are membered in the boxes below only on the last page for this ever ansfer the Total contributions for this event to form No	s, if any, must also appear. [F nt.	Contributor state "Contribution	