



## **Contributors in Officeholder's Employ**

Form 31-G R.C. 3517.10

Full Name of Committee				•
Citizens for Mingo				
Full Name of Contributor				
Mark Potts				
Street Address			Date (MM/DD/YYYY)	Amount
330 Guernsey Ave			10/29/2018	130.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	он	43204	Check	
Full Name of Contributor				
Brian Katz				
Street Address			Date (MM/DD/YYYY)	Amount
180 Thurman Ave			10/29/2018	40.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	он	43206	Cash	
Full Name of Contributor				
LaShawna Miller				
Street Address			Date (MM/DD/YYYY)	Amount
5241 Brandy Oaks Ln			10/29/2018	30.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	ОН	43220	Cash	
Full Name of Contributor				
George Mance				
Street Address			Date (MM/DD/YYYY)	Amount
3741 Kinsey Dr			10/30/2018	30.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	он	43224	EFT	
The above are employees of a unit or department who currently holds the public office County Auditor  I hereby affirm that each contribution was voluntated (Signature of Treasurer or Deputy Treasurer)	Name of Pu	ublic Office	vision and control of Clarence E.	Mingo , Name of Officeholder