31-E R.C. 3517.10(B)

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

Event I	Date_ 3/23/10	Paramone
Page _	1 7	-

Prescribed by Secretary of State 03/05

	Prescribed by Secret	ary or state 03/03		
Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Civil Engineers for Civil Government	Registration Number, if PAC CO449736			
Street Address 12855 Wheaton Ave	Employer/Occup	ation/Labor Organization*	M D Y Amount \$1,000.00	
^{City} Pickerington	Sta te OH	Zip Code 43147	Form (Cash, Check, etc.) Check	
Full Name of Contributor	Registration Number, if PAC			
Calvin Taylor	······································			
Street Address 701 Morning St	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 3 2 4 1 0 \$150.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Worthington	ОН	43085	Check	
Full Name of Contributor			Registration Number, if PAC	
Mark Snider				
Street Address 815 Ebner St	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 3 2 4 1 0 \$50.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43206	Check	
Full Name of Contributor	Registration Number, if PAC			
Ashland Inc Ohio PAC			CP119	
Street Address 5200 Blazer Parkway	Employer/Occup	eation/Labor Organization*	M D Y Amount \$300.00	
City	Sta te	Zip Code	0 3 2 4 1 0 \$300.00 Form (Cash, Check, etc.)	
Dublin	OH	43017	Check	
Full Name of Contributor Carlile, Patchen, & Murphy	Registration Number, if PAC			
Street Address	Employer/Occup	M D Y Amount		
366 E Broad St	Employed Goods	ation buot organismos	0 3 2 4 1 0 \$200.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor Thomas Horner	and the state of t		Registration Number, if PAC	
Street Address 9417 Avemore Ct	Employer/Occup	oation/Labor Organization*	0 3 2 4 1 0 Amount \$150.00	
City Dublin	Sta te OH	Zip Code 43017	Form (Cash, Check, etc.) Check	
Full Name of Contributor John Brandt		Registration Number, if PAC		
Street Address 5187 Smothers Rd	Employer/Occup	oation/Labor Organization*	M D Y Amount \$100.00	
City Westerville	Sta te OH	Zip Code 43081	Form (Cash, Check, etc.) Check	
Required for contributions from individuals over \$100 the individual's business, if any, rather than employer st labor organization of which the employees are member. Fill in the boxes below only on the last page for this ever transfer the Total contributions for this event to form No.	nould be listed. If two or mor s, if any, must also appear. [F	e employees contribute via pay R.C. 3517.10(B)(4)]	roll deduction and exceed the aggregate of \$100, the	
n the date column				
Fotal contributions this event	Total expenditures this event.			
			Page Total \$ \$1,950.00	