Page	5

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			<u></u>		
Citizens for Mingo					
Full Name of Contributor					
Amy Christman					
Street Address			1 1 1 1 1 1	iount	
408 Siesta Dr			0 8 1 3 1 5 \$	100.00	
City	State	Zip Code	Form (Cash, Check, etc.)		
Marion	OH	43302	Check		
Full Name of Contributor					
Nancy Hill					
Street Address		ount			
2615 N 4th St			0 8 1 3 1 5 \$	75.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43202	Check		
Full Name of Contributor					
Kevin Schultz					
Street Address	1 1 1	iount			
7320 Skyline Dr				100.00	
City	Sta _t te	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43235	Check		
Full Name of Contributor					
Margie Betts					
Street Address		nount			
P O Box 6200	P O Box 6200			\$75.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43206	Check		
Full Name of Contributor		_			
Kelly Washington					
Street Address		nount \$35.00			
7471 Williamson Ln				\$35.00	
City	Stal te	Zip Code	Form (Cash, Check, etc.) Check		
Canal Winchester	I OH	43110	Check		
Full Name of Contributor Vicky Anthony					
Street Address 2591 Bryton Dr				nount \$50.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	***	
Powell	OH	43065	Check		
The above are employees of a unit or department under the direct supervision and control of					
	hereby affirm that each contribution was ve	oluntarily made.			
	Signature of Treasurer or Deputy Treasurer				

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from No. 31-G."

\$435.00

Page Total \$