

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>					
Full Name of Contributor <b>Alex Dorsey</b>				Registration Number, if PAC	
Street Address <b>5727 Liberty Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Powell</b>		State <b>OH</b>	Zip Code <b>43065</b>	Y <b>3</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>The Limited PAC</b>				Registration Number, if PAC <b>CP809</b>	
Street Address <b>Three Limited Parkway</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43230</b>	Y <b>3</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Huntington Bancshares PAC</b>				Registration Number, if PAC <b>COO165589</b>	
Street Address <b>41 S High St</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y <b>3</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Calfee Fund for Good Government</b>				Registration Number, if PAC <b>COO351635</b>	
Street Address <b>800 Superior Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Cleveland</b>		State <b>OH</b>	Zip Code <b>44114</b>	Y <b>3</b>	Amount <b>\$200.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Chad Reader</b>				Registration Number, if PAC	
Street Address <b>765 Park St</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y <b>3</b>	Amount <b>\$200.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Thomas Horner</b>				Registration Number, if PAC	
Street Address <b>9417 Avemore Ct</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Dublin</b>		State <b>OH</b>	Zip Code <b>43017</b>	Y <b>3</b>	Amount <b>\$200.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Robert Roach</b>				Registration Number, if PAC	
Street Address <b>2044 Wyandotte Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43212</b>	Y <b>3</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>Check</b>					

\* 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

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Total expenditures this event

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Page Total \$ **\$3,850.00**