

# 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>Andy Bowers</b>				Registration Number, if PAC	
Street Address <b>953 Neil Ave</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Amount <b>\$250.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jason Lindholm</b>				Registration Number, if PAC	
Street Address <b>6720 New Albany Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Cynthia Englefield</b>				Registration Number, if PAC	
Street Address <b>1731 Timberlake Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>Delaware</b>	State <b>OH</b>	Zip Code <b>43015</b>	Amount <b>\$250.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>M/I Homes PAC</b>				Registration Number, if PAC <b>CP1203</b>	
Street Address <b>3 Easton Olive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43219</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Charles Griffith</b>				Registration Number, if PAC	
Street Address <b>522 N State St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	Amount <b>\$250.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Terrence Arnold</b>				Registration Number, if PAC	
Street Address <b>7200 Lakebrook Blvd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43235</b>	Amount <b>\$250.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>David Martin</b>				Registration Number, if PAC	
Street Address <b>6031 Wilton House Ct</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>1</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Amount <b>\$100.00</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 \$ **\$1,300.00**