

# 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>Smith &amp; Hale; c/o David Hodge</b>				Registration Number, if PAC	
Street Address <b>37 W Broad St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jeff Cabot</b>				Registration Number, if PAC	
Street Address <b>60 E Broad St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$150.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Harris, McClellan, Binau &amp; Cox; c/o Dan Binau</b>				Registration Number, if PAC	
Street Address <b>37 W Broad St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Gary Koch</b>				Registration Number, if PAC	
Street Address <b>5381 Adventure Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Thomas Gross</b>				Registration Number, if PAC	
Street Address <b>2700 Crafton Pk</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Amount <b>\$250.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Bernie Caplan</b>				Registration Number, if PAC	
Street Address <b>P O Box 9764</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Ronald Davis</b>				Registration Number, if PAC	
Street Address <b>1855 Perry Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>3</b>
City <b>Frankfort</b>	State <b>OH</b>	Zip Code <b>45628</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 \$ **\$900.00**