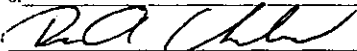


Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo										
Full Name of Contributor Todd Lilley										
Street Address 7299 Porter Dr				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$35.00
City Canal Winchester		State OH	Zip Code 43110		Form (Cash, Check, etc.) Check					
Full Name of Contributor Kimbol Stroud										
Street Address 947 Chara Ln				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$35.00
City Columbus		State OH	Zip Code 43240		Form (Cash, Check, etc.) Check					
Full Name of Contributor Corey Schwartz										
Street Address 138 Olentangy Meadows Dr				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$35.00
City Lewis Center		State OH	Zip Code 43035		Form (Cash, Check, etc.) Check					
Full Name of Contributor Agatha Shields										
Street Address 359 Forestwood Dr				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$70.00
City Gahanna		State OH	Zip Code 43230		Form (Cash, Check, etc.) Check					
Full Name of Contributor Pat Bucklew										
Street Address 6567 Sunbury Rd				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$35.00
City Westerville		State OH	Zip Code 43082		Form (Cash, Check, etc.) Check					
Full Name of Contributor Amy Christman										
Street Address 408 Siesta Dr				M 0	D 3	Y 0	Y 9	Y 1	Y 2	Amount \$50.00
City Marion		State OH	Zip Code 43302		Form (Cash, Check, etc.) Check					

The above are employees of a unit or department under the direct supervision and control of Clarence E Mingo, who currently holds the public office of County Auditor. I hereby affirm that each contribution was voluntarily 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 form No. 31-G."

\$260.00
Page Total \$