

# 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>Ronald Davis</b>			Registration Number, if PAC	
Street Address <b>1855 Perry Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Frankfurt</b>	State <b>OH</b>	Zip Code <b>45628</b>	Y <b>2</b>	Amount <b>\$250.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Michael Saad</b>			Registration Number, if PAC	
Street Address <b>2511 Danvers Ct</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	Y <b>2</b>	Amount <b>\$100.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>William Shimp</b>			Registration Number, if PAC	
Street Address <b>1550 Essex Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Y <b>2</b>	Amount <b>\$100.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Michael Silberstein</b>			Registration Number, if PAC	
Street Address <b>1093 Fountain Ln</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43213</b>	Y <b>2</b>	Amount <b>\$100.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Thomas Taneff</b>			Registration Number, if PAC	
Street Address <b>600 S High St</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>2</b>	Amount <b>\$250.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Craig Anderson</b>			Registration Number, if PAC	
Street Address <b>2370 Onandaga Dr</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Y <b>2</b>	Amount <b>\$250.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Alice Trotter</b>			Registration Number, if PAC	
Street Address <b>3508 Sciota Dr</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Y <b>2</b>	Amount <b>\$50.00</b>
			Form (Cash, Check, etc.) <b>EFT</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

Total expenditures this event.

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1,100.00
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