



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Citizens for Mingo					
Full Name of Contributor Registration Numb					er if PAC
Total Contributions From Form 31-E					5, 117.0
	1 	10	<u> </u>		5 (0 1 0) 1 1
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/Di	·	Amount
	ОН			01/25/2018	8,200.00
Full Name of Contributor				Registration Number	er, if PAC
Total Contributions From Form 31-E					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	ОН	•	`	04/10/2018	6,700.00
Full Name of Contributor		<u> </u>		Registration Number	or if P∆C
Total Contributions From Form 31-E				Tregistiation Humb	a, III AC
· · · · · · · · · · · · · · · · · · ·	-r				
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
	<u></u>				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
	ОН			04/19/2018	18,000.00
Full Name of Contributor	Registration Numb		er, if PAC		
Total Contributions From Form 31-E					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
•	ОН	•		05/30/2018	2,500.00
Full Name of Octoberra					
Full Name of Contributor				Registration Number	er, IT PAC
	_				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
	<u> </u>				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
	ОН				

*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)]

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