

# 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>Tim McGrath</b>			Registration Number, if PAC	
Street Address <b>5305 Rocky Creek Dr</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Dan Muthard</b>			Registration Number, if PAC	
Street Address <b>914 Foxtail Cir</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Tipp City</b>	State <b>OH</b>	Zip Code <b>45371</b>	Y <b>2</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Lawrence Adelman</b>			Registration Number, if PAC	
Street Address <b>300 W Spring 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>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Canini &amp; Associates Ltd; c/o Larry Canini</b>			Registration Number, if PAC	
Street Address <b>P O Box 887</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>54054</b>	Y <b>2</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Magnuson &amp; Barone; c/o Joe Barone</b>			Registration Number, if PAC	
Street Address <b>570 Polaris Parkway</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	Y <b>2</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Glenn Alban</b>			Registration Number, if PAC	
Street Address <b>7100 N High St</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Worthington</b>	State <b>OH</b>	Zip Code <b>43085</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Michael Blankenbecler</b>			Registration Number, if PAC	
Street Address <b>4040 Clark Shaw Rd</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Powell</b>	State <b>OH</b>	Zip Code <b>43065</b>	Y <b>2</b>	Amount <b>\$250.00</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

--

Total expenditures this event.

--

2,050.00