



Contributors in Officeholder's Employ

Form 31-G
R.C. 3517.10

Full Name of Committee

Citizens for Mingo

Full Name of Contributor

Ruth McNeil

Street Address

1494 Lafayette Dr

Date (MM/DD/YYYY)

11/05/2018

Amount

30.00

City

Columbus

State

OH

Zip Code

43220

Form (Cash, Check, etc.)

EFT

Full Name of Contributor

Total Employee Contributions From Pages 25 Through 32

Street Address

Transferred To Form 31-A

Date (MM/DD/YYYY)

Amount

City

State

OH

Zip Code

Form (Cash, Check, etc.)

Full Name of Contributor

Street Address

Date (MM/DD/YYYY)

Amount

City

State

OH

Zip Code

Form (Cash, Check, etc.)

Full Name of Contributor

Street Address

Date (MM/DD/YYYY)

Amount

City

State

OH

Zip Code

Form (Cash, Check, etc.)

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 County Auditor

Name of Officeholder

Name of Public Office

I hereby affirm that each contribution was voluntarily made.


(Signature of Treasurer or Deputy Treasurer)