



Contributors in Officeholder's Employ

Form 31-G R.C. 3517.10

Full Name of Committee				
Citizens for Mingo				
Full Name of Contributor				
Larry McQuain				
Street Address			Date (MM/DD/YYYY)	Amount
6886 Sagestone Dr			09/28/2018	500.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Dublin	он	43016	EFT	
Full Name of Contributor				
Haley Callahan				
Street Address			Date (MM/DD/YYYY)	Amount
2319 Swansea			09/30/2018	100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	ОН	43221	EFT	
Full Name of Contributor				
Angie Musselman				
Street Address			Date (MM/DD/YYYY)	Amount
6934 Rothwell St			10/01/2018	250.00
City	State	Zip Code	Form (Cash, Check, etc.)	
New Albany	ОН	43054	EFT	
Full Name of Contributor				
Brian Katz				
Street Address			Date (MM/DD/YYYY)	Amount
180 Thurman Ave			10/18/2018	500.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Columbus	ОН	43206	Check	
The above are employees of a unit or departmen	nt under th	ne direct super	vision and control of Clarence E. I	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.				
12G(M)				
(Signature of Treasurer or Deputy Treasurer)				