

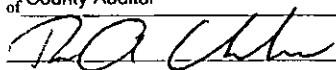
Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo										
Full Name of Contributor Vance Cerasini										
Street Address 2105 Jodilee Ct				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Columbus	State OH	Zip Code 43228	Form (Cash, Check, etc.) Check							
Full Name of Contributor Sharon James										
Street Address 8682 Davington Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$450.00
City Dublin	State OH	Zip Code 43017	Form (Cash, Check, etc.) Check							
Full Name of Contributor Agatha Shields										
Street Address 359 Forestwood Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$350.00
City Gahanna	State OH	Zip Code 43230	Form (Cash, Check, etc.) Check							
Full Name of Contributor Tim Donahue										
Street Address 2188 Case Rd				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$150.00
City Columbus	State OH	Zip Code 43224	Form (Cash, Check, etc.) Check							
Full Name of Contributor Carolyn Hauger										
Street Address 2065 Wayfaring Way				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$150.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) Check							
Full Name of Contributor Brian Katz										
Street Address 3288 Scioto Bend Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$150.00
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, etc.) Check							

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

of County Auditor. I hereby affirm that each contribution was voluntarily made.



(Signature of Treasurer or Deputy Treasurer)

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from form No. 31-G."

\$1,350.00

Page Total \$