

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo										
Full Name of Contributor Jakki Federer										
Street Address 3512 Vintage Woods Dr				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$100.00
City Hilliard		State OH	Zip Code 43026	Form (Cash, Check, etc.) Check						
Full Name of Contributor Kelly McNeal										
Street Address 150 Jefferson Ave				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$50.00
City Ashville		State OH	Zip Code 43103	Form (Cash, Check, etc.) Check						
Full Name of Contributor Corey Schwartz										
Street Address 138 Olentangy Meadows Dr				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$100.00
City Lewis Center		State OH	Zip Code 43035	Form (Cash, Check, etc.) Check						
Full Name of Contributor John Price										
Street Address 505 Whitney Ave				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$100.00
City Worthington		State OH	Zip Code 43085	Form (Cash, Check, etc.) Check						
Full Name of Contributor Dave O'Neil										
Street Address 646 City Park Ave				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$50.00
City Columbus		State OH	Zip Code 43206	Form (Cash, Check, etc.) Check						
Full Name of Contributor Kam Perry										
Street Address 170 Laurel Dr				M 0	D 7	Y 3	Y 1	Y 1	Y 2	Amount \$50.00
City Pataskala		State OH	Zip Code 43062	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."

\$450.00

Page Total \$