


Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Tina Oliver				
Street Address 110 W Dodridge St				
City Columbus	State OH	Zip Code 43202	M 0 D 8 Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Margie Betts				
Street Address 71 E Deshler Ave				
City Columbus	State OH	Zip Code 43206	M 0 D 8 Y 2	Amount \$50.00
Form (Cash, Check, etc.) Cash				
Full Name of Contributor Ed O'Block				
Street Address 5765 Stevens Dr				
City Orient	State OH	Zip Code 43146	M 0 D 8 Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Amy Christman				
Street Address 408 Siesta Dr				
City Marion	State OH	Zip Code 43302	M 0 D 8 Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Teri Fowler				
Street Address 7858 Iris Ct				
City Canal Winchester	State OH	Zip Code 43110	M 0 D 8 Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Pete Stevens				
Street Address 237 E Deshler Ave				
City Columbus	State OH	Zip Code 43206	M 0 D 8 Y 2	Amount \$50.00
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."

\$300.00
Page Total \$