

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>					
Full Name of Contributor <b>Jennifer Adair</b>				Registration Number, if PAC	
Street Address <b>5316 Portland St</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43235</b>	Y <b>0</b>	Amount <b>\$20.00</b>
Form (Cash, Check, etc.) <b>Cash</b>					
Full Name of Contributor <b>Dan Borchert</b>					
Street Address <b>3806 Lakedale Dr</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Hilliard</b>		Sta te <b>OH</b>	Zip Code <b>43026</b>	Y <b>0</b>	Amount <b>\$35.00</b>
Form (Cash, Check, etc.) <b>Cash</b>					
Full Name of Contributor <b>John Coats</b>					
Street Address <b>3652 Pendent Lane</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43207</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Cash</b>					
Full Name of Contributor <b>David Connor</b>					
Street Address <b>306 E Beck St</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43206</b>	Y <b>0</b>	Amount <b>\$35.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Mike Falleur</b>					
Street Address <b>1625 Bethel Rd., Suite 205</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43220</b>	Y <b>0</b>	Amount <b>\$70.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Don Frissora</b>					
Street Address <b>722 Schyler Ct</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Gahanna</b>		Sta te <b>OH</b>	Zip Code <b>43230</b>	Y <b>0</b>	Amount <b>\$35.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Tricia Hunter</b>					
Street Address <b>2052 Argyle Dr</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43219</b>	Y <b>0</b>	Amount <b>\$35.00</b>
Form (Cash, Check, etc.) <b>Check</b>					

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ **\$330.00**