

# 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>Chester, Willcox &amp; Saxbe Good Government Fund</b>				Registration Number, if PAC <b>OH843</b>		
Street Address <b>65 E State St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$250.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Charles Mifsud</b>				Registration Number, if PAC		
Street Address <b>5511 Caplestone Ln</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$500.00</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Eric Laeufer</b>				Registration Number, if PAC		
Street Address <b>13831 Sunladen Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Pickerington</b>	State <b>OH</b>	Zip Code <b>43147</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Carl Christman</b>				Registration Number, if PAC		
Street Address <b>114 Dorchester Sq</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Rob Glick</b>				Registration Number, if PAC		
Street Address <b>4724 Shire Ridge Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>W Mark Jump</b>				Registration Number, if PAC		
Street Address <b>2130 Arlington Ave</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$500.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>David Baker</b>				Registration Number, if PAC		
Street Address <b>1812 Lake Shore Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43204</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 \$ **\$1,650.00**