## **Statement of Contributions Received**



Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Mingo					
Full Name of Contributor Clark Pritchett	<del></del>		Registration Number, if I	AC	
Street Address 4185 Chadbourne Dr	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	0 7 1 5 1 0	Amount \$50.00	
Full Name of Contributor Registration Number, if PAC Robert Werth					
Street Address 4527 Tavistock Circle	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	0 7 2 0 1 0	Amount \$1,000.00	
Full Name of Contributor  Donal Malenick  Registration Number, if				AC	
Street Address 4461 Wayside Dr	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Naples	State FL ,	Zip Code 34119	0 7 2 7 1 0	Amount \$250.00	
Full Name of Contributor  Court Hall					
Street Address 645 Neil Ave	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	0 7 2 7 1 0	Amount \$50.00	
Full Name of Contributor Registration Number, if PAC  Robert Jeffrey					
Street Address 88 E Broad St	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	0 7 2 7 1 0	Amount \$100.00	
Full Name of Contributor Registration Number, if PAC  Jerry Cunningham					
Street Address 104 W Lincoln Ave	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)  Check	
City Worthington	State OH	Zip Code 43085	0 7 2 7 1 0 Registration Number, if I		
ull Name of Contributor Dan Watrous			Registration Number, if I		
Street Address 47 Maple Dr	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	Static OH	Zip Code 43228	0 7 2 7 1 0	Amount \$5.00	
Full Name of Contributor    Jerry McAfee   Registration Number, if PAC					
Street Address 2145 Keltonshire Ave		npation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	$\begin{bmatrix} M & D & Y \\ 0 & 7 & 2 & 7 & 1 \end{bmatrix} 0$	Amount \$200.00	

Page Total \$1,680.00

<sup>\*</sup> 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)]