



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

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Citizens for Mingo				
<b>Full Name of Contributor</b> Ed Hauenstein			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2926 E Mound St	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 07/20/2018	<b>Amount</b> 150.00
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43209	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Tim Pirtle			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2935 Kenny Rd	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 07/20/2018	<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> Nationwide Mutual Insurance PAC			<b>Registration Number, if PAC</b> COOO76174	
<b>Street Address</b> One Nationwide Plaza	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 07/20/2018	<b>Amount</b> 2,500.00
<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> J Donald Mottley			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 137 St Julien St	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 07/20/2018	<b>Amount</b> 150.00
<b>City</b> Worthington	<b>State</b> OH	<b>Zip Code</b> 43085	<b>Form (Cash, Check, Etc)</b> EFT	
<b>Full Name of Contributor</b> Grange Mutual Casualty PAC			<b>Registration Number, if PAC</b> CP677	
<b>Street Address</b> 671 S High St	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 07/27/2018	<b>Amount</b> 1,000.00
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43206	<b>Form (Cash, Check, Etc)</b> Check	

\* 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

Total Expenditures This Event

Page Total \$4,300.00