

# 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>Robert Werth</b>			Registration Number, if PAC	
Street Address <b>4527 Tavistock Circle</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	Amount <b>\$100.00</b>
City <b>Powell</b>	State <b>OH</b>	Zip Code <b>43065</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>John Brandt</b>			Registration Number, if PAC	
Street Address <b>5187 Smothers Rd</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	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>Thomas Campbell</b>			Registration Number, if PAC	
Street Address <b>5787 Medallion Dr</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	Amount <b>\$100.00</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Stanford Ackley</b>			Registration Number, if PAC	
Street Address <b>695 Kenwick</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	Amount <b>\$250.00</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>Bill Englefield</b>			Registration Number, if PAC	
Street Address <b>447 James Pkwy</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	Amount <b>\$100.00</b>
City <b>Heath</b>	State <b>OH</b>	Zip Code <b>43056</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Chester, Willcox &amp; Saxbe Fund</b>			Registration Number, if PAC <b>OH843</b>	
Street Address <b>65 E State St</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	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>Wiles, Boyle, Burkholder, Bringardner PAC</b>			Registration Number, if PAC <b>CP1058</b>	
Street Address <b>300 Spruce St</b>	Employer/Occupation/Labor Organization*		M 1   2   0   2   1   1	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>	

\* 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 \$ **\$1,150.00**