



Contributors in Officeholder's Employ

Form 31-G
R.C. 3517.10

Full Name of Committee

Citizens for Mingo

Full Name of Contributor

Kevin Schultz

Street Address

7329 Skyline Dr

Date (MM/DD/YYYY)

07/27/2018

Amount

100.00

City

Columbus

State

OH

Zip Code

43235

Form (Cash, Check, etc.)

Check

Full Name of Contributor

Charity Crouse

Street Address

6803 Alex Dr

Date (MM/DD/YYYY)

07/28/2018

Amount

50.00

City

Canal Winchester

State

OH

Zip Code

43110

Form (Cash, Check, etc.)

Check

Full Name of Contributor

Michelle Callahan

Street Address

8071 Artisan Way

Date (MM/DD/YYYY)

07/28/2018

Amount

50.00

City

Reynoldsburg

State

OH

Zip Code

43068

Form (Cash, Check, etc.)

Check

Full Name of Contributor

Alande Orelie

Street Address

5367 Cartwright Ln

Date (MM/DD/YYYY)

07/28/2018

Amount

100.00

City

Columbus

State

OH

Zip Code

43231

Form (Cash, Check, etc.)

Check

The above are employees of a unit or department under the direct supervision and control of Clarence E. Mingo

who currently holds the public office County Auditor

Name of Officeholder

Name of Public Office

I hereby affirm that each contribution was voluntarily made.

[Signature]

(Signature of Treasurer or Deputy Treasurer)

Page Total \$300.00