31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

| Event Date | 8/25/10 |
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| Page 4 | 4 |

| Barbara Smith Femployer/Cocupation/Labor Organization* O B 2 6 1 0 3 3 0 0 0 0 8 2 6 1 0 3 3 0 0 0 0 0 0 0 | Citizens for Mingo Full Name of Contributor | | | Registration Number, if PAC |
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| Columbus Final Name of Contributor William Anthonoplos Street Address Lamployer(Occupation/Labor Organization* O | | Employer/Occup | pation/Labor Organization* | 1) 7 1 |
| William Antonoplos Terrer Address Toll Name of Countributor Jonathan McGee Territor Address Z520 Haverford Rd Toll Said to Check Columbus Employer/Occupation/Labor Organization* Said to Check Territor Address Z520 Haverford Rd Toll A 3220 Check Territor Address Columbus OH 43220 Check Territor Address Toll Name of Countributor W Mark Jump Street Address D130 Addrington Ave Toll Name of Countributor W Mark Jump Street Address D130 Addrington Ave Toll Name of Countributor OH 43221 Check Toll Check Toll Name of Countributor William Martin Street Address S597 Correy Swirl Dr Strid to Zip Code OH 43017 Toll Name of Countributor P S Martin Employer/Occupation/Labor Organization* N N D D T V O Namount N N D D T V O Namount S25.00 Toll Check Toll Ch | | | - | |
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| Columbus Columbus | | Employer/Оссир | - | 0 8 2 6 1 0 \$50.00 |
| Jonathan McGee Employer/Occupation/Labor Organization* | • | | | |
| 2520 Haverford Rd Stal te Zip Code Form (Cash, Check, etc.) | | | | Registration Number, if PAC |
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| Full Name of Contributor W Mark Jump Street Address 2130 Arlington Ave Employer/Occupation/Labor Organization* OH 43221 Check Columbus Employer/Occupation/Labor Organization* OH 43221 Check Form (Cash, Check, etc.) Check William Martin Street Address 5597 Correy Swirl Dr State Address Full Name of Contributor DUblin Full Name of Contributor Columbus Full Name of Contributor Columbus Full Name of Contributor Columbus Full Name of Contributor Full Name of Contributor Columbus Full Name of Contributor State Address Employer/Occupation/Labor Organization* OH 8 2 6 7 1 0 \$25.00 Form (Cash, Check, etc.) Columbus Full Name of Contributor Anthony Greco Street Address Employer/Occupation/Labor Organization* OH 8 2 7 1 0 \$25.00 Form (Cash, Check, etc.) Check Registration Number, if PAC Namount \$25.00 Form (Cash, Check, etc.) Check Form (Cash, Check, etc.) Check Registration Number, if PAC Namount \$25.00 Form (Cash, Check, etc.) Check Registration Number, if PAC Amount \$25.00 Form (Cash, Check, etc.) Check Full Name of Contributor is self-employed, the occupation and the rether 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 \$1 labor organization of which the employees are members, if any, must also appear. [R. C. 3517.10(B)(4)] Full Name of Contributions from how of the last page for this event. Full Name of Contributions from form No. 31-E ^{nt} and list the date of the number of the date column Full Name of Contributions from form No. 31-E ^{nt} and list the date of the number of the date column | • | I ' | l ' | |
| Single Address Employer/Occupation/Labor Organization* M 2 6 1 0 \$250.00 | | 1 | | Registration Number, if PAC |
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| Columbus OH 43212 Check Registration Number, if PAC Street Address 6810 Caine Rd City Columbus Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the reliable or organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)] City Columbus Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the reliable organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)] City Columbus Form (Cash, Check, etc.) Check Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the reliable organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)] City Columbus Total expenditures this event. Total expenditures this event. | | Employer/Occup | oation/Labor Organization* | |
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