## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Citizens for Mingo			
Full Name of Contributor			
Chuck Coleman			
Street Address			M D Y Amount
3263 Benbrook Pond Dr			0 7 2 7 1 1 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Hilliard	ОН	43026	Check
Full Name of Contributor	<del></del>		
Margie Betts			
Street Address			M D Y Amount
71 E Deshler	_		0 7 2 7 1 1 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	ОН	43206	Check
Full Name of Contributor			
John Price			
Street Address			M D Y Amount
505 Whitney Ave			0 7 2 7 1 1 \$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Worthington	OH	43085	Check
Full Name of Contributor			
Cindi Becker			
Street Address			M D Y Amount
3046 Bretton Woods Dr			0 7 2 7 1 1 \$50.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43231	Check
Full Name of Contributor			
Shelley May			
Street Address			M D Y Amount
12283 Cleo Dr			0 7 2 7 11 11 \$50.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Orient	OH	43146	Check
Full Name of Contributor		,	
Tina Tate			
Street Address		<b>_</b>	M D Y Amount 0 7 2 7 1 1 \$40.00
6356 Rugosa Ave			Y I' F I' I' I'
City	Starte	Zip Code	Form (Cash, Check, etc.) Cash
Reynoldsburg	OH	43068	CdSH
Clarence E. Mingo			, who currently holds the public office
The above are employees of a unit of department under the direct supervision and control of			
of County Auditor . I hereby affirm that each	contribution was v	oluntarily made.	
1206h			

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from No. 31-G."

\$260.00

Page Total \$