

# 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>Harris, McClellan, Binau &amp; Cox c/o Ralph Dill</b>			Registration Number, if PAC	
Street Address <b>37 W Broad St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Columbus</b>	Sta te <b>OH</b>	Zip Code <b>43215</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Harris, McClellan, Binau &amp; Cox c/o Dan Binau</b>			Registration Number, if PAC	
Street Address <b>37 W Broad St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Columbus</b>	Sta te <b>OH</b>	Zip Code <b>43215</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Karin Andres</b>			Registration Number, if PAC	
Street Address <b>1557 Lafayette Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Columbus</b>	Sta te <b>OH</b>	Zip Code <b>43220</b>	Y <b>1</b>	Amount <b>\$40.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Jim Magnuson</b>			Registration Number, if PAC	
Street Address <b>570 Polaris Parkway</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Westerville</b>	Sta te <b>OH</b>	Zip Code <b>43082</b>	Y <b>4</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Gary Baas</b>			Registration Number, if PAC	
Street Address <b>959 Maebelle Way</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Westerville</b>	Sta te <b>OH</b>	Zip Code <b>43081</b>	Y <b>4</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Jeff Edwards</b>			Registration Number, if PAC	
Street Address <b>495 S High St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Columbus</b>	Sta te <b>OH</b>	Zip Code <b>43215</b>	Y <b>4</b>	Amount <b>\$1,000.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Richard Talbott</b>			Registration Number, if PAC	
Street Address <b>4236 Shire Cove Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>
City <b>Hilliard</b>	Sta te <b>OH</b>	Zip Code <b>43026</b>	Y <b>4</b>	Amount <b>\$1,000.00</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 \$ **\$4,240.00**