

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Columbus Realty Investments Ltd; c/o Don Casto			Registration Number, if PAC	
Street Address 191 W Nationwide Blvd	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$500.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Jenifer French			Registration Number, if PAC	
Street Address 961 Woodsedge Ln	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$150.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, etc.) Check	
Full Name of Contributor Calfee Good Government Fund			Registration Number, if PAC COO351635	
Street Address 800 Superior Ave	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$1,000.00
City Cleveland	State OH	Zip Code 44114	Form (Cash, Check, etc.) Check	
Full Name of Contributor Edwin Overmyer			Registration Number, if PAC	
Street Address 2480 Stonehaven Pl	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$100.00
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) Check	
Full Name of Contributor Crabbe, Brown & James; c/o Larry James			Registration Number, if PAC	
Street Address 500 S Front St	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$1,000.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Michael Gonsiorowski			Registration Number, if PAC	
Street Address 2666 Brentwood Rd	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$100.00
City Bexley	State OH	Zip Code 43209	Form (Cash, Check, etc.) Check	
Full Name of Contributor Columbus Apartment Assn PAC			Registration Number, if PAC OH146	
Street Address 1225 Dublin Rd	Employer/Occupation/Labor Organization*		M   D   Y 0   7   1   7   1   3	Amount \$1,000.00
City Columbus	State OH	Zip Code 43215	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 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 \$ 3,850.00