Statement of Contributions Received

Page 2

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Jobs America PAC			Registration Number, if PAC COO554055	
Street Address 545 E Town St	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	1 0 2 3 1 4	Amount \$2,000.00
Full Name of Contributor Shanthini Jayanthan			Registration Number, if F	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
35 Turnberry Rd City	State	Zip Code	M D Y	Check
Wallingford	CT	06492	1 0 2 3 1 4	\$1,000.00
Full Name of Contributor Mallikha Samuel Registration Number, if PAC				
Street Address 7953 Kennedy Rd	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) Check
City Blacklick	State OH	Zip Code 43004	1 0 2 3 1 4	Amount \$1,000.00
Full Name of Contributor Jasmine Clements			Registration Number, if F	² ĀC
Street Address 3685 Prestwould Close		upation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	M D Y 1	Amount \$1,000.00
Full Name of Contributor Franklin County Republican Party Registration Number, if PAC				
Street Address	Employer/Occi	upation/Labor Organization*	1	Form (Cash, Check, etc.)
14 E Gay St City	State	Zip Code	M D Y	Check
Columbus	OH	43215	1 0 3 1 1 4	\$40,000.00
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	M D Y	Amount
Full Name of Contributor			Registration Number, if I	PAC
Street Address	Employer/Occi	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City	State OH	Zip Code	M D Y	Amount
Full Name of Contributor Registration Number, if PAC				
Street Address	Employer/Occa	upation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.)
City	State OH	Zip Code	M D Y	Amount

^{*} 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)]