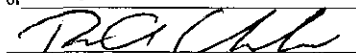


## Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Citizens for Mingo</b>												
Full Name of Contributor <b>Kimbol Stroud</b>												
Street Address <b>947 Chara Ln</b>						M	D	Y	Amount			
						0	1	2	4	1	3	\$100.00
City <b>Columbus</b>		State <b>OH</b>		Zip Code <b>43240</b>		Form (Cash, Check, etc.) <b>Check</b>						
Full Name of Contributor <b>Tina Tate</b>												
Street Address <b>6356 Rugosa Ave</b>						M	D	Y	Amount			
						0	1	2	4	1	3	\$30.00
City <b>Reynoldsburg</b>		State <b>OH</b>		Zip Code <b>43068</b>		Form (Cash, Check, etc.) <b>Check</b>						
Full Name of Contributor <b>Gary Smith</b>												
Street Address <b>5744 Blacks Rd</b>						M	D	Y	Amount			
						0	1	2	4	1	3	\$30.00
City <b>Pataskala</b>		State <b>OH</b>		Zip Code <b>43062</b>		Form (Cash, Check, etc.) <b>Cash</b>						
Full Name of Contributor												
Street Address						M	D	Y	Amount			
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)						
Full Name of Contributor <b>Total Employee Contributions From Pages 72 Through 74</b>												
Street Address <b>Transferred to Form 31-E</b>						M	D	Y	Amount			
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)						
Full Name of Contributor												
Street Address						M	D	Y	Amount			
City		State <b>OH</b>		Zip Code		Form (Cash, Check, etc.)						

The above are employees of a unit or department under the direct supervision and control of Clarence E. Mingo, who currently holds the public office of County Auditor. I hereby affirm that each contribution was voluntarily made.

 (Signature of Treasurer or Deputy Treasurer)

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 form No. 31-G."

**\$160.00**  
Page Total \$