

# 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>Motorists Mutual Civic PAC</b>			Registration Number, if PAC <b>COO336834</b>	
Street Address <b>471 E Broad St</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$750.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Michael Keenan</b>			Registration Number, if PAC	
Street Address <b>7103 Coventry Woods Dr</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$300.00</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Brian Barnes</b>			Registration Number, if PAC	
Street Address <b>4077 Delancy Park Dr</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$100.00</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43016</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Canini &amp; Associates Ltd; c/o Larry Canini</b>			Registration Number, if PAC	
Street Address <b>P O Box 887</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$200.00</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Gary Koch</b>			Registration Number, if PAC	
Street Address <b>5381 Adventure Dr</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$100.00</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Diane Reynolds</b>			Registration Number, if PAC	
Street Address <b>372 W 7th Ave</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   1   6   1   4</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Total Employee Contributions From Form 31-G</b>			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount <b>\$100.00</b>
City	State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)	

\* 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

**\$35,575.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$1,650.00**