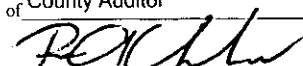


Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Amy Christman				
Street Address 408 Siesta Dr				
City Marion	State OH	Zip Code 43302	M D Y 1 0 1 6 1 4	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Izrath Sameem				
Street Address 5398 Aubrey Loop				
City Dublin	State OH	Zip Code 43016	M D Y 1 0 1 6 1 4	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Larry McQuain				
Street Address 6886 Sagestone Dr				
City Dublin	State OH	Zip Code 43016	M D Y 1 0 1 6 1 4	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Kim McIlwaine				
Street Address 520 Richwood Dr				
City Pataskala	State OH	Zip Code 43062	M D Y 1 0 1 6 1 4	Amount \$25.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Total Employee Contributions From Page 33				
Street Address Transferred to Form 31-E				
City	State OH	Zip Code	M D Y	Amount
Form (Cash, Check, etc.)				
Full Name of Contributor				
Street Address				
City	State OH	Zip Code	M D Y	Amount
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."

\$225.00