

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Chris Holdrieth				
Street Address 507 Van Heyde Pl				
City Columbus	State OH	Zip Code 43209	M D Y 0 8 1 7 1 3	Amount \$150.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Agatha Shields				
Street Address 359 Forestwood Dr				
City Gahanna	State OH	Zip Code 43230	M D Y 0 8 1 7 1 3	Amount \$200.00
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 0 8 1 7 1 3	Amount \$100.00
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 0 8 1 9 1 3	Amount \$150.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Todd Lilley				
Street Address 7299 Porter Dr				
City Canal Winchester	State OH	Zip Code 43110	M D Y 0 8 1 9 1 3	Amount \$150.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Rebecca Reed				
Street Address 3616 Hunters Crossing				
City Grove City	State OH	Zip Code 43123	M D Y 0 8 1 9 1 3	Amount \$150.00
Form (Cash, Check, etc.) Check				

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."

\$900.00

Page Total \$ _____