

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Beckie Wirthiman				
Street Address 81 S Chesterfield Rd			M 1 0	D 1 4
City Columbus			Y 0 9	Amount \$70.00
State OH		Zip Code 43209	Form (Cash, Check, etc.) Check	
Full Name of Contributor Gary Woodward				
Street Address 4665 Brixshire Dr			M 1 0	D 1 4
City Hilliard			Y 0 9	Amount \$35.00
State OH		Zip Code 43026	Form (Cash, Check, etc.) Check	
Full Name of Contributor Ken Perry				
Street Address 170 Laurel Dr			M 1 0	D 1 4
City Pataskala			Y 0 9	Amount \$35.00
State OH		Zip Code 43062	Form (Cash, Check, etc.) Cash	
Full Name of Contributor Kam Perry				
Street Address 170 Laurel Dr			M 1 0	D 1 4
City Pataskala			Y 0 9	Amount \$35.00
State OH		Zip Code 43062	Form (Cash, Check, etc.) Cash	
Full Name of Contributor Andy Unger				
Street Address 875 Waterside Pl			M 1 0	D 1 4
City Grove City			Y 0 9	Amount \$35.00
State OH		Zip Code 43123	Form (Cash, Check, etc.) Cash	
Full Name of Contributor George Mance				
Street Address 3741 Kinsey Dr			M 1 0	D 1 4
City Columbus			Y 0 9	Amount \$35.00
State OH		Zip Code 43224	Form (Cash, Check, etc.) Cash	

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.

RACH (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."

\$245.00

Page Total \$ _____