

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Mark Jump			Registration Number, if PAC	
Street Address 2130 Arlington Ave	Employer/Occupation/Labor Organization*		M 0	D 3
City Columbus	State OH	Zip Code 43221	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Charles Klausman				
Street Address 75 E Gay St			M 0	D 3
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$300.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Steven Boone				
Street Address 1780 Welsh Hills Rd			M 0	D 3
City Granville	State OH	Zip Code 43023	Y 1	Amount \$300.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Zeiger, Tigges & Little LLP; c/o John Zeiger				
Street Address 41 S High St			M 0	D 3
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$200.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Ward Timken				
Street Address 6559 Hills & Dales Rd			M 0	D 3
City Canton	State OH	Zip Code 44708	Y 1	Amount \$300.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Tim Pirtle				
Street Address 2935 Kenny Rd			M 0	D 3
City Columbus	State OH	Zip Code 43221	Y 4	Amount \$1,000.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Thomas Jedinak				
Street Address 1873 Lake Shore			M 0	D 3
City Columbus	State OH	Zip Code 43204	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				

* 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

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Total expenditures this event.

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Page Total \$ **\$2,300.00**