31-E R.C. 3517.10(B)

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

Event Date	6/16/11
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\$4,250.00

Page Total \$

	Prescribed by Secre	tary of State 03/05		
Name of Committee in Full		·		
Citizens for Mingo				
Full Name of Contributor	Registration Number, if PAC			
VSSP Advocates for Effective Government	OH108			
Street Address	Employer/Occur	pation/Labor Organization*	M, D Y Amount	
52 E Gay St	' '	, b	0 5 0 2 1 1 \$1,000.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor			Registration Number, if PAC	
Andrew Showe				
Street Address	Employer/Occur	pation/Labor Organization*	M D Y Amount	
45 N 4th St	employer (700a)	,	0 5 0 2 1 1 \$600.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor	1 011		Registration Number, if PAC	
Robert Weiler				
Street Address		pation/Labor Organization*	M D Y Amount	
41 S High St	Employer/Occu	panon/Laoor Organization	0 5 0 2 1 1 \$1,000.00	
	Sta te	Zip Code	Form (Cash, Check, etc.)	
City Columbus	OH	43215	Check	
Full Name of Contributor		40210	Registration Number, if PAC	
	•		togistation values, it is	
Casto Family Finding LLC c/o Don Cast			M D Y Amount	
Street Address	Employer/Occu	pation/Labor Organization*	0 5 0 2 1 1 \$500.00	
191 W Nationwide Blvd		Zi- Codo	Form (Cash, Check, etc.)	
City	Stal to	Zip Code	Check	
Columbus	OH	43215	Registration Number, if PAC	
Full Name of Contributor Columbus Realty Investments Ltd			Registration Number, it 170	
			M D Y Amount	
Street Address 191 W Nationwide Blvd	Employer/Occu	pation/Labor Organization*	0 5 0 2 1 1 \$500.00	
	Sta te	Zip Code	Form (Cash, Check, etc.)	
City Columbus	OH State	43215	Check	
			Registration Number, if PAC	
Full Name of Contributor Rich & Gillis Law Group LLC c/o Jeff Ric	:h		Registration Number, 1770	
			M D Y Amount	
Street Address 6400 Riverside Dr	Employer/Occi	pation/Labor Organization*	0 5 0 2 1 1 \$150.00	
		Ta: a .		
City Dublin	OH Sta' te	Zip Code 43017	Form (Cash, Check, etc.) Check	
Dublin	I OH.	43017		
Full Name of Contributor			Registration Number, if PAC	
Charles Mifsud				
Street Address	Employer/Occi	ipation/Labor Organization*	M D Y Amount \$500.00	
5511 Caplestone Ln			0 0 0 2 1 1 1	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Dublin	OH	43017	Check	
Required for contributions from individuals over the individual's business, if any, rather than emplo- labor organization of which the employees are me	yer should be listed. If two or me	ore employees contribute via p	outor is self-employed, the occupation and the name of ayroll deduction and exceed the aggregate of \$100, the	
Fill in the boxes below only on the last page for this Transfer the Total contributions for this event to for in the date column	s event. m No. 31-A, Under Full Name o	of Contributor state "Contributi	ions from form No. 31-E" and list the date of the event	
W. a.l		Total expenditures this	event	
Total contributions this event	Total expenditures this event.			