

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Mingo</b>				
Full Name of Contributor <b>Kindcaid Randall &amp; Crane; c/o Kevin Craine</b>			Registration Number, if PAC	
Street Address <b>2201 Riverside Dr</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>William Antonoplos</b>			Registration Number, if PAC	
Street Address <b>75 E Gay St</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Lee Grimes</b>			Registration Number, if PAC	
Street Address <b>6823 Myrtlestone St</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$500.00</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43016</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Joel Rhoades</b>			Registration Number, if PAC	
Street Address <b>5975 S Section Line Rd</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$500.00</b>
City <b>Delaware</b>	State <b>OH</b>	Zip Code <b>43015</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Mark Schriml</b>			Registration Number, if PAC	
Street Address <b>4200 Dublin Rd</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$200.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Ann Craine</b>			Registration Number, if PAC	
Street Address <b>3600 Kitzmiller Rd</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$500.00</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jed Morison</b>			Registration Number, if PAC	
Street Address <b>2572 Brentwood Rd</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   1   8   1   6</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>Check</b>	

\* 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 \$ **\$2,000.00**