

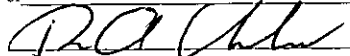
Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo										
Full Name of Contributor Alande Orelein										
Street Address 5567 Cartwright Ln				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Columbus		State OH	Zip Code 43231		Form (Cash, Check, etc.) Check					
Full Name of Contributor Jerzell Pierre-Louis										
Street Address 6227 Berringer Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Westerville		State OH	Zip Code 43082		Form (Cash, Check, etc.) Check					
Full Name of Contributor John Price										
Street Address 505 Whitney Ave				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Worthington		State OH	Zip Code 43085		Form (Cash, Check, etc.) Check					
Full Name of Contributor Corey Shcwarz										
Street Address 138 Olentangy Meadows Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Lewis Center		State OH	Zip Code 43035		Form (Cash, Check, etc.) Check					
Full Name of Contributor Kimbol Stroud										
Street Address 947 Chara Ln				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Columbus		State OH	Zip Code 43240		Form (Cash, Check, etc.) Check					
Full Name of Contributor Gary Woodward										
Street Address 4665 Brixshire Dr				M 0	D 6	Y 2	Y 0	Y 1	Y 1	Amount \$100.00
City Hilliard		State OH	Zip Code 43026		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."

\$600.00

Page Total \$