Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full			· · · · · · · · · · · · · · · · · · ·	
Citizens for Mingo				
Full Name of Contributor			•	
Laurie Ludium				
Street Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		M D Y A	mount
1615 Dundee Ct			0 7 1 5 1 0	\$50.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	•
Columbus	OH	43227	Check	
Full Name of Contributor			-	
Tina Tate				
Street Address			M D Y A	mount
6356 Rugosa Ave			0 7 1 5 1 0	\$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Reynoldsburg	OH	43068	Check	
Full Name of Contributor				
Tina Oliver				
Street Address				mount
110 W Dodridge St			0 7 1 5 1 0	\$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43202	Cash	
Full Name of Contributor				
Margie Betts				
Street Address		•		mount
71 E Deshler Ave			0 7 1 5 1 0	\$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43206	Cash	
Full Name of Contributor				
Vicky Anthony				
Street Address			7 3 1 1 1 1	mount
2591 Bryton Dr			0 7 1 5 1 0	\$40.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Poweil	OH	43065	Cash	
Full Name of Contributor				
Brenda Toops				
Street Address				mount \$40.00
3424 Amsby Rd				Φ+0.00
City Columbus	Stal te OH	Zip Code 43232	Form (Cash, Check, etc.) Check	
Columbus	On	43232	CHECK	
The above are employees of a unit or department under t	the direct supervision and control of	arence E. Mingo	, who currently hold	s the public office
	are an ear supervision and control of		, was carreinly note	s are public unice
of County Auditor	ereby affirm that each contribution was vo	oluntarily made.		
01/3/1/	ignature of Transcurer or Deputy Transcurer	ì		

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."

\$250.00
Page Total \$ _____