31-E R.C. 3517.10(B)

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

Event Date 7/29/10]
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	Prescribed by Secre	lary of State 03/03		
Name of Committee in Full Citizens for Mingo				
Full Name of Contributor			Registration Number, if PAC	
Mark Arnold				
Street Address	Employer/Occur	pation/Labor Organization*	M D Y Amount	
1400 Haft Dr		<u> </u>	0 7 0 2 1 0 \$150.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Reynoldsburg	OH	43068	Check	
Full Name of Contributor	of Contributor			
Nisource PAC			COO051979	
Street Address	Employer/Occup	pation/Labor Organization*	M D Y Amount	
200 Civic Center Dr			0 7 0 2 1 0 \$150.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus Full Name of Contributor	ОН	43215	Check	
Glenn Alban			Registration Number, if PAC	
Street Address			M D Yi Amount	
7100 N High St	Employer/Occup	oation/Labor Organization*	0 7 0 2 1 0 \$100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Worthington	OH	43085	Check	
Full Name of Contributor			Registration Number, if PAC	
Edward Carey			1110-1111111111111111111111111111111111	
Street Address	Employer/Occur	nation/Labor Organization*	M D Y Amount	
140 E Town St			0 7 1 2 1 0 \$100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Check	
Full Name of Contributor	<u> </u>		Registration Number, if PAC	
Thomas Taneff				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
600 S High St			0 7 1 2 1 0 \$100.00	
City Columbus	Sta te	Zip Code 43215	Form (Cash, Check, etc.) Check	
	OH	43215		
Full Name of Contributor Stan Ackley			Registration Number, if PAC	
Street Address	Employer/Occur	nation/Labor Organization*	M D Y Amount	
695 Kenwick Rd	Employer/Occup	Salton Bason Organizzation	0 7 1 2 1 0 \$500.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43209	Check	
Full Name of Contributor			Registration Number, if PAC	
Charles Griffith				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
522 N State St			0 7 1 2 1 0 \$250.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Westerville	OH	43082	Check	
the individual's business, if any, rather than emplo labor organization of which the employees are me ill in the boxes below only on the last page for thi	oyer should be listed. If two or more embers, if any, must also appear. [R is event.	e employees contribute via pa R.C. 3517.10(B)(4)]	ator is self-employed, the occupation and the name yroll deduction and exceed the aggregate of \$100, the self-employed properties of \$100 and the self-employed properties of the events from form No. 31-E" and list the date of the events of	
				
otal contributions this event		event.		
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			£4 250 O	
			Page Total \$ \$1,350.00	