31-E R.C. 3517.10(B)

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

Event Date	3/18/14
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Name of Committee in Full	Prescribed by Secret		
Citizens for Mingo			
Full Name of Contributor			Registration Number, if PAC
Harold Keller			
Street Address	Employer/Occup	ation/Labor Organization*	M. D. Y. Amount
543 Greenglade Ave		B	0 3 2 6 1 4 \$250.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Worthington	OH	43085	Check
Full Name of Contributor	<u>, , , , , , , , , , , , , , , , , , , </u>		Registration Number, if PAC
Pizzuti PAC			OH1260
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount
Two Miranova PI			0 3 2 6 1 4 \$250.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
ull Name of Contributor			Registration Number, if PAC
Mitchell Given			
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount
4490 Fabel St			0 3 2 6 1 4 \$100.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
New Albany	OH	43054	Check
ull Name of Contributor		Registration Number, if PAC	
Jobs America PAC			COO554055
reet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount
545 E Town St			0 3 2 6 1 4 \$100.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43215	Check
Full Name of Contributor Dilip Mehta			Registration Number, if PAC
treet Address	Employer/Chaus	ation/Labor Organization*	M D Yi Amount
1041 Huntly Dr	Imployercecup	anon/Labor Organization	0 3 2 6 1 4 \$100.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
Folsom	CA	95630	Check
ull Name of Contributor Trevor Vessels			Registration Number, if PAC
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount
1308 Broadview Ave		_	0 3 2 6 1 4 \$100.00
ity	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43212	Check
ull Name of Contributor Dwayne Pickett			Registration Number, if PAC
treet Address	Employer/Occup	ation/Labor Organization*	M D Y Amount
1233 Baytree Ct			0 3 2 6 1 4 \$25.00
ity	Sta to	Zip Code	Form (Cash, Check, etc.)
Reynoldsburg	OH	43068	Check
he individual's business, if any, rather than emplo abor organization of which the employees are me Il 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.	employees contribute via pa .C. 3517.10(B)(4)]	utor is self-employed, the occupation and the name eyroll deduction and exceed the aggregate of \$100, the open self-employed and exceed the aggregate of \$100, the open self-employed in the exceedance of the exc
and an architecture at the court		mad es sa	
tal contributions this event		Total expenditures this of	event.
'			
,			\$925.00
			Page Total \$