


Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo						
Full Name of Contributor Vance Cerasini						
Street Address 2105 Jodilee Ct						Amount \$200.00
City Columbus	State OH	Zip Code 43228	M 0		D 2	Y 2
			Form (Cash, Check, etc.) Check			
Full Name of Contributor Kevin Schultz						
Street Address 7320 Skyline Dr						Amount \$100.00
City Columbus	State OH	Zip Code 43235	M 0		D 2	Y 2
			Form (Cash, Check, etc.) Cash			
Full Name of Contributor George Mance						
Street Address 3741 Kinsey Rd						Amount \$50.00
City Columbus	State OH	Zip Code 43224	M 0		D 2	Y 2
			Form (Cash, Check, etc.) Cash			
Full Name of Contributor Jessica Wilkins Bibbs						
Street Address 5660 Montevideo Rd						Amount \$100.00
City Westerville	State OH	Zip Code 43081	M 0		D 2	Y 2
			Form (Cash, Check, etc.) Check			
Full Name of Contributor Kimbol Stroud						
Street Address 947 Chara Ln						Amount \$100.00
City Columbus	State OH	Zip Code 43240	M 0		D 2	Y 2
			Form (Cash, Check, etc.) Check			
Full Name of Contributor Kam Perry						
Street Address 170 Laurel Dr						Amount \$100.00
City Pataskala	State OH	Zip Code 43062	M 0		D 2	Y 2
			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."

\$650.00
Page Total \$