

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

Prescribed by Secretary of State 03/05

Event Date 7/30/14

Page 8150

Name of Committee in Full <b>Citizens for Mingo</b>				
Full Name of Contributor <b>Melissa Hoeffel</b>			Registration Number, if PAC	
Street Address <b>1443 Cliff Ct</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43204</b>	Y <b>0</b>	Amount <b>\$300.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Baker &amp; Hostetler PAC</b>			Registration Number, if PAC <b>OH125</b>	
Street Address <b>1900 E 9th St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Cleveland</b>	State <b>OH</b>	Zip Code <b>44114</b>	Y <b>0</b>	Amount <b>\$1,000.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Don Shackelford</b>			Registration Number, if PAC	
Street Address <b>21 E State St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>0</b>	Amount <b>\$1,000.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Alan Jones</b>			Registration Number, if PAC	
Street Address <b>5118 Nyah Ct</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Galena</b>	State <b>OH</b>	Zip Code <b>43021</b>	Y <b>0</b>	Amount <b>\$500.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Stephanie Adams</b>			Registration Number, if PAC	
Street Address <b>4740 Heathstead Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43016</b>	Y <b>0</b>	Amount <b>\$75.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Helen Aukerman</b>			Registration Number, if PAC	
Street Address <b>6499 Cedar Brook Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Y <b>0</b>	Amount <b>\$50.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Shirley Beres</b>			Registration Number, if PAC	
Street Address <b>6026 Fallensby Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Y <b>0</b>	Amount <b>\$25.00</b>
			Form (Cash, Check, etc.) <b>Check</b>	

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

--	--

Total expenditures this event.

--	--

Page Total \$ **\$2,950.00**