

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

Prescribed by Secretary of State 03/05

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|---|---|--------------------------|--|---------------|---------------|-----------------------------|
| Name of Committee in Full Citizens for Mingo | | | | | | |
| Full Name of Contributor David Connor | | | Registration Number, if PAC | | | |
| Street Address 306 E Beck St | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Columbus | State OH | Zip Code 43206 | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Michael Blankenbecler | | | Registration Number, if PAC | | | |
| Street Address 4040 Clark Shaw Rd | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Powell | State OH | Zip Code 43065 | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Brad Bennett | | | Registration Number, if PAC | | | |
| Street Address 3050 Avalon Rd | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Columbus | State OH | Zip Code 43221 | Form (Cash, Check, etc.) EFT | | | |
| Full Name of Contributor Thomas Campbell | | | Registration Number, if PAC | | | |
| Street Address 3787 Medallion Dr | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Westerville | State OH | Zip Code 43082 | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Casto Family Fund LLC; c/o Don Casto | | | Registration Number, if PAC | | | |
| Street Address 250 Civic Center Dr | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$1,000.00 |
| City Columbus | State OH | Zip Code 43215 | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Mark Corna | | | Registration Number, if PAC | | | |
| Street Address 2101 Abbotts Ford Green Dr | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Powell | State OH | Zip Code 43065 | Form (Cash, Check, etc.) Check | | | |
| Full Name of Contributor Nicholas Zuk | | | Registration Number, if PAC | | | |
| Street Address 593 Brook Run Dr | Employer/Occupation/Labor Organization* | | M 0 | D 1 | Y 1 | Amount \$300.00 |
| City Westerville | State OH | Zip Code 43081 | Form (Cash, Check, etc.) Check | | | |

* 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

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Total expenditures this event.

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Page Total \$ **\$2,800.00**