


Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
Full Name of Contributor Ken Perry				
Street Address 170 Laurel Dr			M 0	D 8
City Pataskala			Y 0	Amount \$100.00
State OH		Zip Code 43062	Form (Cash, Check, etc.) Check	
Full Name of Contributor Todd Lilley				
Street Address 2852 Hampton Rd			M 0	D 8
City Columbus			Y 0	Amount \$50.00
State OH		Zip Code 43232	Form (Cash, Check, etc.) Check	
Full Name of Contributor Gary haynes				
Street Address 5335 Uly Rd			M 0	D 8
City Westerville			Y 0	Amount \$200.00
State OH		Zip Code 43081	Form (Cash, Check, etc.) Check	
Full Name of Contributor Melissa Belhorn				
Street Address 8444 Papillon Ave			M 0	D 8
City Reynoldsburg			Y 0	Amount \$50.00
State OH		Zip Code 43068	Form (Cash, Check, etc.) Check	
Full Name of Contributor Rick McGivern				
Street Address 3257 Northampton Dr			M 0	D 8
City Hilliard			Y 0	Amount \$100.00
State OH		Zip Code 43026	Form (Cash, Check, etc.) Check	
Full Name of Contributor Sandra Fais				
Street Address 1793 Bluff Ave			M 0	D 8
City Columbus			Y 0	Amount \$50.00
State OH		Zip Code 43212	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."

\$550.00

Page Total \$