Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Citizens for Priscilla Tyson								
Full Name of Contributor		 -	Registrat	ion Num	ber, if PA	C		
Contributions from Form 31-E						ľ		
Street Address	Employer/Occi	pation/Labor Organizat	on*			Form (Cash, Check, etc.)		
	7/25/1	ıb Fundraise	r					
City	State	Zip Code	M	D	Υ	Amount		
			0 7	2 5	1 2	15,825.00		
Full Name of Contributor				Registration Number, if PAC				
			- 1					
Street Address	Employer/Occu	ion*			Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Υ	Amount		
Full Name of Contributor			Registrat	ion Num	ber, if PA	c .		
Street Address	Employer/Occi	ipation/Labor Organizat	ion*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registrat	ion Num	ber, if PA	С		
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
				-				
City	State	Zip Code	M	l D	Y	Amount		
				1	10-1			
Full Name of Contributor Registrat					stration Number, if PAC			
	Idress Employer/Occupation/Labor Organization*					r (0 1 0 1 1 1)		
Street Address	Employer/Occi	ipation/Labor Organizat	ion*			Form (Cash, Check, etc.)		
	- Court		LV.	n	Ιν	A		
City	State	Zip Code	M	D I	Y	Amount		
Full Name of Contributor			Pagistent	ion Num	hor if DA	C		
run Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occo	ipation/Labor Organizat	ion*			Form (Cash, Check, etc.)		
Sitest Address imployer/Occupation/Lator C			1011		Tonn (Cash, Check, Cic.)			
City	State	Zip Code	М	D	Y	Amount		
	Jac	Zip Cool		Ĭ				
Full Name of Contributor			Registrat	ion Num	ber, if PA	Č		
					,			
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
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City	State	Zip Code	М	D	Y	Amount		

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 15,825.00