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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Citizens for Lori M Tyack							
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registra	ation Nun	nber, if PA	.C	
TOTAL CONTRIBUTIONS FRO	M FORM 31-E						
Street Address		pation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)	
City	State	Zip Code	М	Ð	Y	Amount 15,220.12	
Full Name of Contributor	<u> </u>	1	Registra	ation Nun	nber, if PA		
The Huntington Bancshares Incorporated PAC			C0	C00165589			
Street Address		pation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)	
41 S. High Street	Bank					Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43215	1 0	1 4	1 0	750.00	
Full Name of Contributor			Registr	ation Nun	nber, if PA	vC	
Woody Fox							
Street Address		pation/Labor Organization*				Form (Cash, Check, etc.)	
233 N. Bend Dr.	Bondsn			r _	1	Check	
City	State	Zip Code	M	D	Y	Amount	
Pataskala	O H	43062-7551		1 3			
Full Name of Contributor			Registr	ation Nun	nber, if PA	i.C	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registr	ation Nun	nber, if PA	iC .	
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
Silver Address	Employen/Occu	Ballon Cabon Organization				r om (cash, check, etc.)	
City	State	Zip Code	М	D 	Y	Amount	
Full Name of Contributor	l	<u>-l</u>	Registra	ation Nun	nber, if PA	C	
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount	
	State	Zip Code	"			Vanount	
Full Name of Contributor			Registra	ation Num	iber, if PA	С	
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
a'				T _			
City	State	Zip Code	M	D	Y 	Amount	
Full Name of Contributor Registration Number, if PAC					C		
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	Đ	Y	Amount	
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* 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 \$ 16,970.12