

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Priscilla Tyson									
Full Name of Contributor Ronald Hagan						Registration Number, if PAC			
Street Address 480 South Third Street			Employer/Occupation/Labor Organization* Friends of O'Grady Committee				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43215		M 0   7	D 2   3	Y 0   9	Amount 2,500.00
Full Name of Contributor Staples, Inc. (Merchandise Return)						Registration Number, if PAC			
Street Address 1747 Olentangy River Road			Employer/Occupation/Labor Organization* Staples, Inc.				Form (Cash, Check, etc.) Credit		
City Columbus		State O   H		Zip Code 43212		M 0   7	D 2   3	Y 0   9	Amount 44.82
Full Name of Contributor Helen Evans						Registration Number, if PAC			
Street Address 1015 McGregor Avenue			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) Check		
City Worthington		State O   H		Zip Code 43085		M 0   8	D 0   2	Y 0   9	Amount 25.00
Full Name of Contributor Wendy Coffey						Registration Number, if PAC			
Street Address 500 South Front Street, Suite 1200			Employer/Occupation/Labor Organization* Crabbe, Brown, & James				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43215		M 0   8	D 1   1	Y 0   9	Amount 1,000.00
Full Name of Contributor John Banghart						Registration Number, if PAC			
Street Address 1562 Abraham Woods Road			Employer/Occupation/Labor Organization* Ribway Engineering, Inc.				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43232		M 0   8	D 2   4	Y 0   9	Amount 100.00
Full Name of Contributor Nathaniel Carter						Registration Number, if PAC			
Street Address 6335 Bellmeadow Drive			Employer/Occupation/Labor Organization* Pastor				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43229		M 0   8	D 2   4	Y 0   9	Amount 50.00
Full Name of Contributor Noel Johnson						Registration Number, if PAC			
Street Address 233 Martin Luther King Jr Blvd			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43203		M 0   8	D 2   8	Y 0   9	Amount 25.00
Full Name of Contributor Fredericia Willis						Registration Number, if PAC			
Street Address 1728 Spartan Drive			Employer/Occupation/Labor Organization* Unemployed				Form (Cash, Check, etc.) Check		
City Columbus		State O   H		Zip Code 43209		M 0   8	D 3   1	Y 0   9	Amount 25.00

\* 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 \$ 3,769.82