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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Citizens for Priscilla Tyson						
Full Name of Contributor			Registration Number, if PAC			
James Negron	7					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
6498 Glass Drive	Corna Kokosing Construction Co. Exec VP			Check		
City	State	Zip Code	Date	Amount		
Westerville	OH	43061	04/25/2017	\$1,000.00		
Full Name of Contributor			Registration Numb	er, if PAC		
Pizzuti PAC						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2829 Bryden Road		Ta: a :		Check		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43209	04/26/2017	\$2,500.00		
Full Name of Contributor Regis			Registration Numb	Registration Number, if PAC		
Marlana Lowery						
Street Address	Employer/Occupation/Labor Organization*		ganization*	Form (Cash, Check, etc.)		
5812 Riverton Road	Self Author		Cash			
City	State	Zip Code	Date	Amount		
Columbus	OH	43232	04/25/2017	\$10.00		
Full Name of Contributor	l v					
Sylvia Antoinette Garrett						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
259 Crooked Tree Court	Nationwide Insurance Agency Owner			Check		
City	State	Zip Code	Date	Amount		
Westerville	OH	43081	04/25/2017	\$100.00		
Full Name of Contributor			Registration Numb	er, if PAC		
Yvonne Horton						
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
572A Eastmoor		nsultant		Cash		
City	State	Zip Code	Date	Amount		
Columbus	OH	43209	04/25/2017	\$50.00		
Full Name of Contributor Registration Number, if PAC						
Firefighters Local 67 PAC Fund						
Street Address	Employer/Occupation/Labor Organization*		ganization*	Form (Cash, Check, etc.)		
379 West Broad Street		Tai a i		Check		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43215	04/20/2017	\$1,000.00		
Full Name of Contributor	er, if PAC					
Stonewall Democrats of Central Ohio						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
PO Box 10814				Check		
City	State	Zip Code	Date	Amount		
Columbus	OH	43201-7814	04/25/2017	\$100.00		
Full Name of Contributor Registration Num			er, if PAC			
N/A	N/A					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
N/A	N/A			N/A		
City	State	Zip Code	Date	Amount		
NI/A	I NI/A	NI/A	NI/A	\$0.00		

Page Total: \$4,760.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]