

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Priscilla Tyson</b>					
Full Name of Contributor <b>Columbus Apartment Association PAC</b>				Registration Number, if PAC <b>OH146</b>	
Street Address <b>1225 Dublin Road</b>		Employer/Occupation/Labor Organization* <b>Labor Organization</b>		Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>1</b>	Y <b>0</b>
			Amount <b>\$500.00</b>		
Full Name of Contributor <b>Barbara Benham</b>				Registration Number, if PAC <b>HBI-PAC COO165589</b>	
Street Address <b>41 South High Street</b>		Employer/Occupation/Labor Organization* <b>Hunting Bancshares</b>		Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>4</b>	Y <b>1</b>
			Amount <b>\$1,000.00</b>		
Full Name of Contributor <b>Contributions from From 31-E</b>				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization* <b>Fund-Raising Event of 06/15/11</b>		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y
			Amount <b>\$10,600.00</b>		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State <b>OH</b>	Zip Code	M	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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$12,100.00**