31-A							
R.C.	3517.10						

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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			
Firefighters Local 67 PAC Fund						
Street Address	Employer	/Occupation/Labor Org	anization*	Form (Cash, Check, etc.)		
379 West Broad Street	ļ	<del>_</del>		Check		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43215	04/20/2017	\$1,000.00		
Full Name of Contributor	Il Name of Contributor			Registration Number, if PAC		
Yvonne Horton	vonne Horton					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
572A Eastmoor	Self - Consultant			Cash		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43209	04/25/2017	<b>\$</b> 50.00		
Full Name of Contributor			Registration Number, if PAC			
Marlana Lowery						
Street Address		/Occupation/Labor Org	anization*	Form (Cash, Check, etc.)		
5812 Riverton Road	Self - Author			Cash		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43232	04/25/2017	\$10.00		
Full Name of Contributor	<u> </u>		Registration Number,	, if PAC		
Sylvia Antoinette Garrett						
Street Address	1	/Occupation/Labor Org		Form (Cash, Check, etc.)		
259 Crooked Tree Court	Sylvia G	arrett Insurance Ager	ncy - Owner	Check		
City	State	Zip Code	Date	Amount		
Westerville	ОН	43081	04/25/2017	\$100.00		
Full Name of Contributor			Registration Number,	, if PAC		
Stonewall Democrats of Central Ohio						
Street Address	Employer/Occupation/Labor Organization*		anization*	Form (Cash, Check, etc.)		
PO Box 10814	<u> </u>			Check		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43201-7814	04/25/2017	\$100.00		
Full Name of Contributor			Registration Number, if PAC			
James Negron				· · · · · · · · · · · · · · · · · · ·		
Street Address		/Occupation/Labor Org		Form (Cash, Check, etc.)		
6498 Glass Drive	Corna Ke	okosing Construction	1	Check		
City	State	Zip Code	Date	Amount		
Westerville	ОН	43061	04/25/2017	\$1,000.00		
Full Name of Contributor			Registration Number,	umber, if PAC		
N/A	N/A					
Street Address	Employer	Occupation/Labor Orga	anization*	Form (Cash, Check, etc.)		
N/A	N/A			N/A		
City	State	Zip Code	Date	Amount		
N/A	N/A	N/A	N/A	\$0.00		
Full Name of Contributor			Registration Number, 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	Laura	31/4	NI/A	\$0.00		

Page Total: \$2,260.00

<sup>\*</sup> 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)]