

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Priscilla Tyson</b>					
Full Name of Contributor <b>Sharon C. Cameron</b>				Registration Number, if PAC	
Street Address <b>741 City Park Avenue</b>	Employer/Occupation/Labor Organization* <b>Self-Employed</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>35.00</b>
Full Name of Contributor <b>Nathaniel Carter</b>				Registration Number, if PAC	
Street Address <b>6335 Bell Meadow Drive</b>	Employer/Occupation/Labor Organization* <b>Pastor</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43229</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Mario Ciardelli</b>				Registration Number, if PAC	
Street Address <b>23 West Second Avenue</b>	Employer/Occupation/Labor Organization* <b>IBEW 683 PCE</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>1,000.00</b>
Full Name of Contributor <b>Laura M. Comek</b>				Registration Number, if PAC	
Street Address <b>500 South Front Street</b>	Employer/Occupation/Labor Organization* <b>Crabbe, Brown &amp; James</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>William B. Conner</b>				Registration Number, if PAC	
Street Address <b>55 East State Street</b>	Employer/Occupation/Labor Organization* <b>CAPA</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>200.00</b>
Full Name of Contributor <b>David Crandall</b>				Registration Number, if PAC <b>C00377044</b>	
Street Address <b>150 East Gay Street, Room 4A</b>	Employer/Occupation/Labor Organization* <b>AT&amp;T OH EmployeePAC</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Paige D. Crane</b>				Registration Number, if PAC	
Street Address <b>19 North Drexel Avenue</b>	Employer/Occupation/Labor Organization* <b>Unemployed</b>		M <b>0</b>	D <b>7</b>	Y <b>10</b>
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>

\* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

16,835.00

Total expenditures this event

3,017.15

Page Total \$ 2,035.00