31-E R.C. 3517.10(B)

Event Date	7/27/10
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05 Name of Committee in Full Citizens for Priscilla Tyson Full Name of Contributor Registration Number, if PAC Rev. Dr. Carolyn L. Pettigrew Street Address Employer/Occupation/Labor Organization* D Amount 2 6 1 0 1780 Halleck Place Spirit Care Ministries, Inc. 300.00 Zip Code Form(Cash,Check,etc) Columbus | H 43209 Check Full Name of Contributor Registration Number, if PAC Shervle L. Powell Street Address Employer/Occupation/Labor Organization* 814 Abbey Court City of Columbus 0 7 2 8 1 0 100.00 City State Zip Code Form(Cash,Check,etc) Pickerington Η 43147 Check Full Name of Contributor Registration Number, if PAC Nannette S. Reynolds Street Address Employer/Occupation/Labor Organization* Amount 7671 Fenway Road 017 2 6 1 0 Travel/Event Planner 100.00 City State Zip Code Form(Cash,Check,etc) New Albany 43054 Check Full Name of Contributor Registration Number, if PAC Francine D. Rice Street Address Employer/Occupation/Labor Organization* Amount 2097 Willamont Avenue Retired 0|8|0|150.00 City State Zip Code Form(Cash,Check,etc) Columbus 43219 Check Full Name of Contributor Registration Number, if PAC Richard C. Rieth Street Address Employer/Occupation/Labor Organization* Amount 2289 North High Street 0 | 7 | 2 | 7 | 1 | 0 Realtor 100.00 City Zip Code Form(Cash,Check,etc) State Columbus 43201 Check Full Name of Contributor Registration Number, if PAC Dana G. Rinehart Street Address Employer/Occupation/Labor Organization* D Amount 300 East Broad Street, Suite 190 0 7 2 7 1 0 Attornev 100.00 City Zip Code State Form(Cash,Check,etc) Columbus 43215 Check Full Name of Contributor Registration Number, if PAC James Robert Rishel Street Address Employer/Occupation/Labor Organization* D Amount 629 East Walnut Street 0 7 2 7 1 0 Attornev 100.00 City Zip Code Form(Cash,Check,etc) Westerville 43081 Check

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	Total expenditures this event	1	
		Page Total \$	850.00
16.835.00	3.017.15		

^{*} 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)]