

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Lori M. Tyack				
Full Name of Contributor Zachary Scott			Registration Number, if PAC	
Street Address 369 S High Street	Employer/Occupation/Labor Organization* Sheriff's Office		M 0 8 0 9 1 0	D Y Amount \$125.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Kenneth W Peltier			Registration Number, if PAC	
Street Address 4065 Saturn Rd	Employer/Occupation/Labor Organization* Retired		M 0 8 2 6 1 0	D Y Amount \$125.00
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, etc.) Check	
Full Name of Contributor Chuck Brown II Bail Bonds LLC (Chuck Brown)			Registration Number, if PAC	
Street Address 342 S High Street	Employer/Occupation/Labor Organization* Bondsman		M 0 8 1 8 1 0	D Y Amount \$500.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Columbus Franklin County AFL-CIO PCE			Registration Number, if PAC	
Street Address 1545 Alum Creek Drive, 2nd Floor	Employer/Occupation/Labor Organization* AFL-CIO PCE		M 0 8 1 7 1 0	D Y Amount \$600.00
City Columbus	State OH	Zip Code 43209	Form (Cash, Check, etc.) Check	
Full Name of Contributor Nathan Sei Akamine			Registration Number, if PAC	
Street Address 844 S Front Street	Employer/Occupation/Labor Organization* Attorney		M 0 8 3 1 1 0	D Y Amount \$125.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) Check	
Full Name of Contributor Apelles LLC (Michael Fitzmartin)			Registration Number, if PAC	
Street Address 195 W Schrock rd	Employer/Occupation/Labor Organization* Collection Company		M 0 8 2 0 1 0	D Y Amount \$500.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, etc.) Check	
Full Name of Contributor Michael Scoliere			Registration Number, if PAC	
Street Address 4603 Gwynedd Court	Employer/Occupation/Labor Organization* Linebarger Groggon		M 0 8 0 4 1 0	D Y Amount \$1,000.00
City Dublin	State OH	Zip Code 43016	Form (Cash, Check, etc.) Check	

\* 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)]

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

\$15,260.12

Total expenditures this event.

\$4,660.08

Page Total \$ 2,975.00