

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Lori M. Tyack							
Full Name of Contributor Huntington Bancshares Inc.-PAC					Registration Number, if PAC c00165589		
Street Address 41 South High St		Employer/Occupation/Labor Organization* PAC		M 0	D 3	Y 2	Amount 250.00
City Columbus	State O	H H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor John Handier - SMD/HLS Bonding Co. LLC					Registration Number, if PAC		
Street Address 571 South High St		Employer/Occupation/Labor Organization* Bonding Co.		M 0	D 4	Y 2	Amount 200.00
City Columbus	State O	H H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor Paula Brooks					Registration Number, if PAC		
Street Address 4585 Benderton Ct		Employer/Occupation/Labor Organization* Attorney / Franklin Co. Con		M 0	D 5	Y 0	Amount 200.00
City Columbus	State O	H H	Zip Code 43220	Form(Cash,Check,etc) Check			
Full Name of Contributor Plumbers & Pipefitters L.U. 189 - PCE					Registration Number, if PAC PCE Entity 6220		
Street Address 1250 Kinear Rd		Employer/Occupation/Labor Organization* Labor Union		M 0	D 5	Y 0	Amount 100.00
City Columbus	State O	H H	Zip Code 43212	Form(Cash,Check,etc) Check			
Full Name of Contributor Jeffrey Thompson					Registration Number, if PAC		
Street Address 601 S. High St		Employer/Occupation/Labor Organization* Attorney		M 0	D 5	Y 0	Amount 150.00
City Columbus	State O	H H	Zip Code 43215	Form(Cash,Check,etc) Check			
Full Name of Contributor IBEW/COPE					Registration Number, if PAC Best Effort		
Street Address 900 Seventh St, NW		Employer/Occupation/Labor Organization* Labor Union		M 0	D 5	Y 1	Amount 500.00
City Washington	State O	H H	Zip Code 20001	Form(Cash,Check,etc) Check			
Full Name of Contributor Portman, Foley & Flint LLP					Registration Number, if PAC		
Street Address 471 East Broad St		Employer/Occupation/Labor Organization* LLP		M 0	D 5	Y 1	Amount 100.00
City Columbus	State O	H H	Zip Code 43215	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 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

4,525.00

Total expenditures this event

694.60

Page Total \$ 1,500.00