

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>CITIZEN FOR PRISCILLA TYSON</b>							
Full Name of Contributor <b>Charlotte Carter</b>					Registration Number, if PAC		
Street Address <b>4753 Coachford Dr</b>		Employer/Occupation/Labor Organization* <b>Cols Public Schools</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43231</b>	M <b>1   0</b>	D <b>1   6</b>	Y <b>0   7</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Marsha Wilson</b>					Registration Number, if PAC		
Street Address <b>220 N Virginia Lee</b>		Employer/Occupation/Labor Organization* <b>Cols Brown &amp; Lace</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43209</b>	M <b>1   0</b>	D <b>1   6</b>	Y <b>0   7</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Herbert James</b>					Registration Number, if PAC		
Street Address <b>13240 Pickerington Rd</b>		Employer/Occupation/Labor Organization* <b>Self-Employed</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Pickerington</b>	State <b>O   H</b>	Zip Code <b>43147</b>	M <b>1   0</b>	D <b>1   6</b>	Y <b>0   7</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Larry Price</b>					Registration Number, if PAC		
Street Address <b>1587 Franklin Pk s</b>		Employer/Occupation/Labor Organization* <b>Attorney</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43205</b>	M <b>1   0</b>	D <b>1   6</b>	Y <b>0   7</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>National City Pac</b>					Registration Number, if PAC <b>CP 256</b>		
Street Address <b>1900 E Ninth St</b>		Employer/Occupation/Labor Organization* <b>National City Bank</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Cleveland</b>	State <b>O   H</b>	Zip Code <b>44114</b>	M <b>1   0</b>	D <b>1   8</b>	Y <b>0   7</b>	Amount <b>750.00</b>	
Full Name of Contributor <b>Misc. Yard Sign Donations</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City	State	Zip Code	M	D	Y	Amount <b>16.00</b>	
Full Name of Contributor <b>Misc. T-Shirts Donations</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>cash</b>		
City	State	Zip Code	M	D	Y	Amount <b>210.00</b>	
Full Name of Contributor <b>Melita Hairston</b>					Registration Number, if PAC		
Street Address <b>3022 Gleska Dr</b>		Employer/Occupation/Labor Organization* <b>US Postal Service</b>			Form (Cash, Check, etc.) <b>cash</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43219</b>	M <b>0   7</b>	D <b>3   0</b>	Y <b>0   7</b>	Amount <b>20.00</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)]