

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Priscilla Tyson							
Full Name of Contributor Theodore Scott						Registration Number, if PAC	
Street Address 1076 Marland Drive North			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43224	M 1   0	D 1   6	Y 0   9	Amount 200.00	
Full Name of Contributor Otto Beatty, Jr						Registration Number, if PAC	
Street Address 233 South High Street			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43215	M 1   0	D 1   9	Y 0   9	Amount 150.00	
Full Name of Contributor Charleta Tavares						Registration Number, if PAC	
Street Address 1237 Medford Road			Employer/Occupation/Labor Organization* City of Columbus			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43209	M 1   0	D 1   9	Y 0   9	Amount 500.00	
Full Name of Contributor Edmund F. Brown						Registration Number, if PAC	
Street Address 4662 Tatersall Drive			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43230	M 1   0	D 2   1	Y 0   9	Amount 50.00	
Full Name of Contributor Frederick D. Benton, Jr						Registration Number, if PAC	
Street Address 786 South Front Street, Suite 204			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43206	M 1   0	D 2   2	Y 0   9	Amount 100.00	
Full Name of Contributor Nathan P. Wymer						Registration Number, if PAC OH259	
Street Address One Nationwide Plaza, 1-32-06			Employer/Occupation/Labor Organization* Nationwide Better Citizenship Fund			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43215	M 1   0	D 2   2	Y 0   9	Amount 500.00	
Full Name of Contributor Willie E. Keaton						Registration Number, if PAC	
Street Address 1771 Franklin Avenue			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43205	M 1   0	D 2   3	Y 0   9	Amount 100.00	
Full Name of Contributor Thomas S. Diamond						Registration Number, if PAC	
Street Address 2811 Kensington Place East			Employer/Occupation/Labor Organization* City of Columbus			Form (Cash, Check, etc.) Check	
City Columbus	State O   H	Zip Code 43202	M 1   0	D 2   6	Y 0   9	Amount 50.00	

\* 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)]

Page Total \$ 1,650.00