

# 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 Harold Benny			Registration Number, if PAC	
Street Address 342 S High Street	Employer/Occupation/Labor Organization* Chuck Brown Bail Bonds		M 0 9 0 9 1 0	D Y Amount \$125.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Cash	
Full Name of Contributor Aggregate Contributions of Under \$25 Each			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M 0 9 0 9 1 0	D Y Amount \$475.00
City	State OH	Zip Code	Form (Cash, Check, etc.) Cash	
Full Name of Contributor Mark Dempsey			Registration Number, if PAC	
Street Address 1305 Westwood Avenue	Employer/Occupation/Labor Organization* Attorney		M 0 9 0 9 1 0	D Y Amount \$125.00
City Columbus	State OH	Zip Code 43212	Form (Cash, Check, etc.) Check	
Full Name of Contributor Dennis Johnson, Jr. NSF Returned Check			Registration Number, if PAC	
Street Address 56 Langtree Dr	Employer/Occupation/Labor Organization* Capitol Recovery		M 0 9 0 9 1 0	D Y Amount \$2,000.00
City Pickerington	State OH	Zip Code 43147	Form (Cash, Check, etc.) Check	
Full Name of Contributor Michael O'Grady			Registration Number, if PAC	
Street Address 471 E Broad St, Ste 2001	Employer/Occupation/Labor Organization* Attorney		M 0 9 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 Michael E. Rankin			Registration Number, if PAC	
Street Address 2432 Wyncourtney Ct	Employer/Occupation/Labor Organization* Assist. Sec. of State		M 0 9 0 9 1 0	D Y Amount \$100.00
City Powell	State OH	Zip Code 43065	Form (Cash, Check, etc.) Check	
Full Name of Contributor Sujatha Nair			Registration Number, if PAC	
Street Address 298 Beckley Lane	Employer/Occupation/Labor Organization* 3SG/ Owner		M 0 9 0 9 1 0	D Y Amount \$500.00
City Dublin	State OH	Zip Code 43017	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

Total expenditures this event.

\$15,220.12

\$4,660.08

Page Total \$ 3,450.00

\$15,260.12