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31-A-2
R.C. 3517.10(B)

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Citizens for Priscilla Tyson

Full Name	Registration Number, if PAC	Address	Type*	City	State	Zip Code	M	D	Y	Amount	Form(Cash,Check,etc)
American Airlines		MD5651 P.O. Box 619616	RE	DFW Airport	TX	75261-9616	03	09	15	23.10	Debit
PayPal, Inc. (Amount Included on Previous Statement's Total)		P.O. Box 45950		Omaha	NE	68145-0950	01	28	15	15.75	Funds Transfer
PayPal, Inc. (Amount Included on Previous Statement's Total)		P.O. Box 45950		Omaha	NE	68145-0950	01	28	15	2,650.00	Funds Transfer
PayPal, Inc. (Amount Reconciled on Current Report)		P.O. Box 45950		Omaha	NE	68145-0950	01	29	15	1,794.61	Funds Transfer

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, place the letters IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total $ 4,483.46