		7人
Event Date	O5/15/07	N
Page	1	

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full								
CITIZENS FOR PRISCILLA TYSON			10.2					
To Whom Paid				M	D	Y	Amount	
LOTUS				0 5	1 5	0 7		1,500.00
Address	Purpose							
482 S. FRONT STREET								
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Address	Purpose							
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To Whom Paid				M	D	Y	Amount	
Address	Purpose							
City	Sta	ate	Zip Code	Check	Number			
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Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Page Total \$ 1.500.00