Statement of Contributions Received

1 Page _____

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Priscilla Tyson	····			
Foll Name of Contributor			Registration Number, if	PAC
Kathleen P. Murphy Street Address 2416 Southway Drive		pation/Labor Organization* and Epson Marketing		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	M D V	Amount \$100.00
Full Name of Contributor Anne K Jeffrey	!		Registration Number, if	PAC
Street Address 296 Ashbourne Place	Employer/Occu Retired	Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43209	0 7 0 7 1 1 1	Amount \$250.00
Full Name of Contributor Vory's Sater Seymour and Pease LLP			Registration Number, if PAC OH109	
Street Address 52 Gay Street		Employer/Occupation/Labor Organization* Legal Partnership		Form (Cash, Check, etc.) Check
City	State OH	Zip Code 43215	0 7 0 7 1	Amount 1 \$300.00
Pull Name of Contributor Diane E Nance			Registration Number, it	PAC
Street Address 209 Winthrop Road	I	Employer/Occupation/Labor Organization* Professor		Form (Cash, Check, etc.) Check
City Columbus	Staje OH	Zip Code 43214	0 7 2 0 1 1	
Full Name of Contributor AT&T Inc. Ohio Employee PAC			Registration Number, if COO377044	FAC
Street Address 150 East Gay Street	Employer/Occu	pation/Labor Organization*	-	Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	$\begin{bmatrix} 0^{\text{M}} & 7 & 2^{\text{I}} & 1 \end{bmatrix}$	Amount \$50.00
Full Name of Contributor Jack R Marchbanks			Registration Number, if	PAC
Street Address 46 N Ohio Avenue		Employer/Occupation/Labor Organization* Administrator		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43203	0 7 1 4 1 1	
Full Name of Contributor Marlene Nowell			Registration Number, if	PAC
Street Address P O Box 24293		Employer/Occupation/Labor Organization* Col Chapter of Coalition of Black Trace		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43224	0 7 1 1 1 1	Amount \$50.00
Pull Name of Centributed NiSource Inc. PAC			Registration Number, if PAC COOO51979	
Street Address 200 Civic Center Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zη/Code 43215	0 7 2 0 1	Amount \$100.00

Page Total \$1,050.00

^{*}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 also appear. [R.C. 3517.10(B)(4)]