

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Priscilla Tyson							
Full Name of Contributor Peter N. Cass					Registration Number, if PAC		
Street Address 305 Olentangy Street		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   5	Y 0   9	Amount 100.00	
Full Name of Contributor Francis Frazier					Registration Number, if PAC		
Street Address 3466 Bolton Avenue		Employer/Occupation/Labor Organization* Consultant			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43227	M 1   0	D 2   7	Y 0   9	Amount 75.00	
Full Name of Contributor John A. Lyall					Registration Number, if PAC LA1273		
Street Address 6800 North High Street		Employer/Occupation/Labor Organization* AFSCME Ohio Council 8			Form (Cash, Check, etc.) Check		
City Worthington	State O   H	Zip Code 43085	M 1   0	D 2   8	Y 0   9	Amount 500.00	
Full Name of Contributor Edwin R. Clay					Registration Number, if PAC		
Street Address 6424 Tamar Court		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State O   H	Zip Code 43068	M 1   0	D 3   0	Y 0   9	Amount 50.00	
Full Name of Contributor Wayne Garland					Registration Number, if PAC		
Street Address 48 East 15th Avenue		Employer/Occupation/Labor Organization* Buckeye Real Estate			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43201	M 1   0	D 3   0	Y 0   9	Amount 300.00	
Full Name of Contributor Doug Reffitt					Registration Number, if PAC		
Street Address 1394 Courtright Road		Employer/Occupation/Labor Organization* Ohio & Vicinity Regional Council			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43227	M 1   0	D 3   0	Y 0   9	Amount 500.00	
Full Name of Contributor Barbara Bayless					Registration Number, if PAC		
Street Address 4812 Crazy Horse Lane		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Online		
City Westerville	State O   H	Zip Code 43081	M 1   1	D 0   1	Y 0   9	Amount 75.00	
Full Name of Contributor Pamela L. Gant					Registration Number, if PAC		
Street Address 7165 Biddick Court		Employer/Occupation/Labor Organization* Unemployed			Form (Cash, Check, etc.) Check		
City New Albany	State O   H	Zip Code 43054	M 1   1	D 0   1	Y 0   9	Amount 500.00	

\* 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 \$ 2,100.00