

14

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full CITIZENS FOR PRISCILLA TYSON						
Full Name of Contributor JOHN C IVORY			Registration Number, if PAC			
Street Address 788 REDFORD AVE	Employer/Occupation/Labor Organization* RETIRED		M 0 7	D 0 9	Y 1 3	Amount 100.00
City COLUMBUS	State O H	Zip Code 43207	Form(Cash,Check,etc) CHECK			
Full Name of Contributor JEFF BROWN			Registration Number, if PAC			
Street Address 37 WEST BRAOD STREET STE 725	Employer/Occupation/Labor Organization* SMITH & HALE		M 0 7	D 0 9	Y 1 3	Amount 100.00
City COLUMBUS	State O H	Zip Code 43215	Form(Cash,Check,etc) CHECK			
Full Name of Contributor COLUMBUS FRANKLIN COUNTY AFL-CIO PCE			Registration Number, if PAC			
Street Address 1545 ALUM CREEK DRIVE	Employer/Occupation/Labor Organization* LABOR UNION		M 0 7	D 1 0	Y 1 3	Amount 300.00
City COLUMBUS	State O H	Zip Code 43209	Form(Cash,Check,etc) CHECK			
Full Name of Contributor JULIA S PHELPS			Registration Number, if PAC			
Street Address 8290 POST ROAD	Employer/Occupation/Labor Organization* PRESIDENT		M 0 7	D 0 9	Y 1 3	Amount 100.00
City DUBLIN	State O H	Zip Code 43017	Form(Cash,Check,etc) CHECK			
Full Name of Contributor MARK CORNA			Registration Number, if PAC			
Street Address 10153 CHELTON WOOD	Employer/Occupation/Labor Organization* CEO		M 0 7	D 0 9	Y 1 3	Amount 500.00
City POWEL	State O H	Zip Code 43065	Form(Cash,Check,etc) CHECK			
Full Name of Contributor FREDERICIA WILLIS			Registration Number, if PAC			
Street Address 1728 SPARTAN DR	Employer/Occupation/Labor Organization* HOMEMAKER		M 0 7	D 1 5	Y 1 3	Amount 25.00
City COLUMBUS	State O H	Zip Code 43209	Form(Cash,Check,etc) CHECK			
Full Name of Contributor LISA HUANG			Registration Number, if PAC			
Street Address 7102 DUBLIN ROAD	Employer/Occupation/Labor Organization* OWNER		M 0 7	D 1 8	Y 1 3	Amount 100.00
City DUBLIN	State O H	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 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

Page Total \$ 1,225.00