31-A R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

							Newscare and the second second
Name of Committee in Full							
Citizens for Priscilla Tyson							
Full Name of Contributor			Registra	ition Nur	nber, if P	AC	
Evelyn Doughty				***************************************	***************************************		
Street Address	i i	ccupation/Labor Organization*				Form (Cash, C	Check, etc.)
1123 Rosewood Avenue	Retire					Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	101	43219		0 1	0 9		25.00
Full Name of Contributor			Registra	ation Nur	nber, if P	AC	
Sylvia Dixon					Walter March Williams and asserted		
Street Address	Employer/O	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
2941 Castlewood Road	Legal	Legal Secretary				Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	1 0 1	1 43209	0 9	0 3	0 9		20.00
Full Name of Contributor		20 Contract 2 from 190 or money and 2 contract Contract Contract (2 for 2 for	Registra	ition Nur	nber, if P	AC	
Robert Short							
Street Address	Employer/O	ccupation/Labor Organization*	200000000000000000000000000000000000000			Form (Cash, Check, etc.)	
1841 Bryden Road	Retire	Retired				Check	
City	State	Zip Code	М	D	Υ	Amount	
Columbus	1 0	43205	019	0 3	0 9		25.00
Full Name of Contributor				ation Nur		AC	
William Willis, Jr							
Street Address	Employer/O	ccupation/Labor Organization*		<u> </u>		Form (Cash, C	Check, etc.)
1715 Franklin Park South		Defense Supply Center Col				Check	, ,
City	State	Zip Code	M	D	ΙY	Amount	
Columbus		43205	nla	0 7	0 9		50.00
Full Name of Contributor		1000		tion Nur		AC	00.00
Anne Jeffrey					,		
Street Address	Employer/O	ccupation/Labor Organization*		**************		Form (Cash, C	Check, etc.)
296 Ashbourne Place		ployed				Check	
City	State	Zip Code	М	D	ΙΥ	Amount	
Columbus	1	43209	l l	0 8			250.00
Full Name of Contributor		3.0 km 0 2				PAC	200.00
Full Name of Contributor Registration Number, if PAC Samuel McDaniel							
Street Address	Employer/O	Employer/Occupation/Labor Organization*				Form (Cash, C	heck etc.)
69 Miami Avenue, Unit C		General Contractor				Check	
City	State	Zip Code	М	T D	ΙΥ	Amount	
Columbus	•	1 43203	l l	0 8		7 (inount	50.00
Full Name of Contributor				tion Nur))	50.00
Hearcel Craig			Керын	icion itai	11001, 11 1	//C	
Street Address	Employer/O	ccupation/Labor Organization*	<u> </u>			Form (Cash (hack etc.)
550 East Walnut Street		Employer/Occupation/Labor Organization* Hearcel Craig for Council				Form (Cash, Check, etc.) Check	
City	State	Zip Code	I M	l D	ΙΥ	Amount	
Columbus	Oll	1 ' ' '	0 9	1		Amount	250.00
Full Name of Contributor		* ±0210	arena de la companya	2 3 ation Nur	0 9	L.C	230.00
Barbara Benham				01655	,	AC	
Street Address	Employer/O	ccupation/Labor Organization*		01000	ロン	Earm (Cash C	Thork et a
41 South High Street	1 '	Huntington Bancshares, Inc. PAC			Form (Cash, Check, etc.)		
City	State	Zip Code		1	1 V	Check	
, and the second	1		M	D		Amount	1 500 00
Columbus	101	43215	0 9	2 4	0 9		1,500.00

* 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 \$ 2,170.00