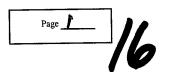
In-Kind Contributions Received



Prescribed by Secretary of State 3/05

Name of Committee in Full						
CITIZENS FOR PRISCILLA TYSON	In 1 0		Registration Nu	wher if DAC		
Full Name of Contributor	Employer, Occupation, Labor Organization * US POSTAL SERVICE		Registration Nu	iller, ii FAC	•	
FRANCINE RICE Street Address	Description of Item or Service		M D	Y	Fair Market Value	
2097 WILLAMONT AVENUE	DECORATIONS		0 5 1 5			75.78
City	State Zip Code		Received at Fundraising Event?			
COLUMBUS	$O \mid H \mid$	43219	✓ YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Nu	mber, if PAC	C	
FRANCINE RICE	US POSTAL SERVICE					
Street Address	Description of Item or Service		M D		Fair Market Value	10.00
2097 WILLAMONT AVENUE	BALLONS		0 6 1			10.00
City		Zip Code	Received at Fur	draising Eve		
COLUMBS	$O \mid H$	43219	✓ YES	1 (47)	ои	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
FRANCINE RICE	US POSTAL SERVICE		M D Y Fair Market Value			
Street Address	Description of Item or Service		$\begin{bmatrix} M \\ 0 \end{bmatrix} 7 \begin{bmatrix} 0 \end{bmatrix}$	1 1	ran market value	61.19
2097 WILLAMONT AVENUE	CANDY & FLAGS State Zip Code		Received at Fu		ent?	01.17
city COLUMBUS	State H	43219	YES	idiaishig 24	NO	
Full Name of Contributor		ation, Labor Organization *	Registration No	mber, if PA		
Full Name of Contributor	Employer, Occup	ation, Labor Organization	Trogisti and the			
Street Address	Description of Ite	m or Service	M D	Y	Fair Market Value	
Street Address						
City	State	Zip Code	Received at Fu	ndraising Ev	ent?	
			YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC					
Chant Address	Description of Item or Service		M D	Y	Fair Market Value	
Street Address	Besonption of the				,	
City	State	Zip Code	Received at Fu	ndraising Ev	vent?	
			YES		NO	
Full Name of Contributor	Employer, Occup	oation, Labor Organization *	Registration N	ımber, if PA	AC .	
Street Address	Description of Item or Service		M D	Y	Fair Market Value	
City	State	Zip Code	Received at Fu	ndraising E	$\overline{}$	
			YES		∐NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
			M D	ΙΥ	Fair Market Value	<u> </u>
Street Address	Description of Item or Service		M D	1 1	Fair Market Value	•
	- Ct. t.	Zip Code	Received at F	ndraising F	vent?	
City	State	Zip Code	YES	maraising D	NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
0	Description of Item or Service		M D	ΙΥ	Fair Market Value	e
Street Address				Î		
City	State Zip Code		Received at Fundraising Event?			
City		1	YES	-	NO	

Page Total \$	146.97

^{*} 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)]