

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Priscilla Tyson</b>					
Full Name of Contributor <b>JoAnne I. Goldhand</b>				Registration Number, if PAC	
Street Address <b>90 West Second Avenue</b>		Employer/Occupation/Labor Organization* <b>Skilken</b>		M   D   Y <b>0   7   2   3   1   0</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43201</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Joy A. Gonsiorowski</b>				Registration Number, if PAC	
Street Address <b>2666 Brentwood Road</b>		Employer/Occupation/Labor Organization* <b>Unemployed</b>		M   D   Y <b>0   7   2   6   1   0</b>	Amount <b>100.00</b>
City <b>Bexley</b>		State <b>O   H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Earl F. Greer, Jr.</b>				Registration Number, if PAC	
Street Address <b>2735 Scottwood Road</b>		Employer/Occupation/Labor Organization* <b>Psychologist</b>		M   D   Y <b>0   7   2   5   1   0</b>	Amount <b>50.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Lisa Griffin</b>				Registration Number, if PAC	
Street Address <b>1965 Lake Shore Drive</b>		Employer/Occupation/Labor Organization* <b>Self-Employed</b>		M   D   Y <b>0   7   2   6   1   0</b>	Amount <b>500.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43204</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Daniel R. Helmick</b>				Registration Number, if PAC <b>OH1310</b>	
Street Address <b>250 West Street</b>		Employer/Occupation/Labor Organization* <b>Schottenstein,Zox&amp;Dunn</b>		M   D   Y <b>0   7   2   7   1   0</b>	Amount <b>500.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Gale Hill</b>				Registration Number, if PAC	
Street Address <b>1 Miranova Place, Suite 1820</b>		Employer/Occupation/Labor Organization* <b>AJH, Inc.</b>		M   D   Y <b>0   7   2   7   1   0</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>David L. Hodge</b>				Registration Number, if PAC	
Street Address <b>37 West Broad Street</b>		Employer/Occupation/Labor Organization* <b>Smith &amp; Hale, LLC</b>		M   D   Y <b>0   7   2   6   1   0</b>	Amount <b>500.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	

\* 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

16,835.00

Total expenditures this event

3,017.15

Page Total \$ 1,850.00