31-E
R.C. 3517.10(B)

Event Date 7/11/13
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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	Registration Number, if PAC				
TINA D RANSOM					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
581 WOODLAND AVE	RANSOM CO	07	01	13	250.00
City	State / Zip Code	Form(Cash,Check,etc)			
COLUMBUS	OH 43203	CHECK			
Full Name of Contributor	Registration Number, if PAC				
ROBERT E FALCONE					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
150 E LAFAYETTE STREET	PHYSICAN	06	30	13	100.00
City	State / Zip Code	Form(Cash,Check,etc)			
COLUMBUS	OH 43215	CHECK			
Full Name of Contributor	Registration Number, if PAC				
ANDREW O ERIBO					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
7165 BIDDICK COURT	ENGINEER	07	01	13	250.00
City	State / Zip Code	Form(Cash,Check,etc)			
NEW ALBANY	OH 43054	CHECK			
Full Name of Contributor	Registration Number, if PAC				
SHARRON D MILLER					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
P O BOX 228	HOMEMAKER	07	11	13	100.00
City	State / Zip Code	Form(Cash,Check,etc)			
POWELL	OH 43065	CHECK			
Full Name of Contributor	Registration Number, if PAC				
ANNE K JEFFREY					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
296 ASHBOURNE PLACE	HOMEMAKER	07	02	13	250.00
City	State / Zip Code	Form(Cash,Check,etc)			
COLUMBUS	OH 43209	CHECK			
Full Name of Contributor	Registration Number, if PAC				
KIMBERLY BLACKWELL					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
1601 W 5TH AVE STE 166	PMM AGENCY	07	08	13	250.00
City	State / Zip Code	Form(Cash,Check,etc)			
COLUMBUS	OH 43212	MO			
Full Name of Contributor	Registration Number, if PAC				
JOHN KENNEDY					
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount
500 SOUTH FRONT STREET	CRABBE,BROWN,JAMES	07	03	13	500.00
City	State / Zip Code	Form(Cash,Check,etc)			
COLUMBUS	OH 43215				

* 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 $ 1,700.00