31-E R.C. 3517.10(B)

Event Date	7/25/12
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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 Nicholas Akins Street Address Employer/Occupation/Labor Organization* 7788 Boyston Court **AEP** 0|7|3|1250.00 Zip Code State Form(Cash,Check,etc) City Dublin Н 43016 Check Full Name of Contributor Registration Number, if PAC Milton Baughman Employer/Occupation/Labor Organization* D 321 East Sycamore Street 0 7 2 5 1 2 500.00 Zip Code Form(Cash,Check,etc) Columbus Η 43206 Check Registration Number, if PAC Full Name of Contributor Darnita Bradley C00051979 Street Address Employer/Occupation/Labor Organization* D 200 Civic Center Drive NiSource Inc PAC 1 1 250.00 City Zip Cod Form(Cash,Check,etc) 43215 Columbus Η Check Full Name of Contributor Registration Number, if PAC **Jeffrey Brown** Street Address Employer/Occupation/Labor Organization* 500.00 37 West Broad Street Smith and Hale, LLC 0 7 2 5 1 2 City Zip Cod Form(Cash,Check,etc) Columbus 43215 Check Full Name of Contributor Registration Number, if PAC **Jennifer** Brunner Employer/Occupation/Labor Organization* 35 North Fourth Street, Suite 250 0 7 2 5 1 2 75.00 Attorney Zip Code Form(Cash,Check,etc) City State 43215 Columbus Check Full Name of Contributor Registration Number, if PAC William Brian Burgett Employer/Occupation/Labor Organization* D Amount 0 7 2 9 1 2 7274 Kendal Lane **Kokosing Construction** 1,000.00 City Zip Code Form(Cash,Check,etc) **Lewis Center** $\parallel H$ 43035 Check Full Name of Contributor Registration Number, if PAC **Donald Casto** Employer/Occupation/Labor Organization* Street Address D 191 West Nationwide Blvd, Ste. 200 Casto Family Funding, LLC 0 7 1 2 1 2 500.00 Zip Code Form(Cash,Check,etc) Columbus Η 43215 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 No. 31-E" and list the date of the event in the date column Total contributions this event Total expenditures this event Page Total \$ _ 3,075.00 15.825.00