

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Priscilla Tyson							
Full Name of Contributor Kay Onwukwe					Registration Number, if PAC		
Street Address 2929 North High Street		Employer/Occupation/Labor Organization* HKI Associates, Inc.			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M 1 0	D 2 5	Y 1 3	Amount 50.00	
Full Name of Contributor Nathaniel Carter					Registration Number, if PAC		
Street Address 6335 Bellmeadow Drive		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43229	M 1 0	D 2 7	Y 1 3	Amount 100.00	
Full Name of Contributor Chester Christie					Registration Number, if PAC		
Street Address 1344 Eldorn Drive		Employer/Occupation/Labor Organization* City of Columbus			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43207	M 1 0	D 2 8	Y 1 3	Amount 50.00	
Full Name of Contributor Donna A. James					Registration Number, if PAC		
Street Address 1 Miranova Place, Suite 1040		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 3 0	Y 1 3	Amount 500.00	
Full Name of Contributor Heather Bishoff					Registration Number, if PAC		
Street Address 2902 Braden Way		Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) Check		
City Blacklick	State O H	Zip Code 43004	M 1 0	D 2 3	Y 1 3	Amount 100.00	
Full Name of Contributor Arthur L. Evans					Registration Number, if PAC		
Street Address 5426 Baneberry Avenue		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 1 0	D 2 6	Y 1 3	Amount 100.00	
Full Name of Contributor Jacqueline H. Woodard					Registration Number, if PAC		
Street Address 8104 Griswold Drive		Employer/Occupation/Labor Organization* Self-Employed			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1 0	D 2 5	Y 1 3	Amount 50.00	
Full Name of Contributor Robert E. Short					Registration Number, if PAC		
Street Address 1841 Bryden Road		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43205	M 1 0	D 2 2	Y 1 3	Amount 50.00	

* 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 \$ 1,000.00