Page	7_	

Statement of Contributions Received

Prescribed by Secretary of State 3 05

Name of Committee in Full						***
Citizens for Burriss						
Full Name of Contributor			Registra	ation Num	her if PA	C
			Registre	mon ram	001, 11 171	
John M Moore Street Address	Employer Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
	Employer Occup	atton/Labor Organization				Check
64 E Kelso Rd		Zip Code		D	Y	Amount
City	State	43202	M	1	1	250.00
Columbus Full Name of Contributor	IO H	43202	0 6	3 0		<u> </u>
			Registra	nion Num	ber, ii FA	
Seth B Young	Te i o					Cook Charleste
Street Address	Employer Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
2500 Mount Holyoke Rd		la: 6)	Γ.,	1 5	Т	Check
City	State	Zip Code	M	D	Y	Amount
Upper Arlington	O H	43221		3 0	1 7	100.00
Full Name of Contributor			Registra	ation Num	iber, if PA	AC .
Jodene Scarbrough			L			
Street Address	Employer Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
2790 Alliston Ct						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43220	0 6	3 0	1 7	50.00
Full Name of Contributor	·		Registra	ation Num	ber, if PA	AC .
Edward J Roberts						
Street Address	Employer Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
5469 Loyola St	_					Check
City	State	Zip Code	М	D	Y	Amount
Columbus	ОН	43221	0 7	1 4	1 7	50.00
Full Name of Contributor			Registra	ation Num	ber, if PA	ı.C
Albert J Siegrist			_			
Street Address	Employer Occup	oation/Labor Organization*				Form (Cash, Check, etc.)
1974 Northwest Blvd						Check
City	State	Zip Code	М	D	Y	Amount
Columbus	ОН	43212	0 7	1 4	1 7	250.00
Full Name of Contributor		-	Registra	ation Num	ber, if PA	AC .
Jon Kelly			1			
Street Address	Employer Occup	oation/Labor Organization*				Form (Cash, Check, etc.)
2709 Wickliffe Rd						Check
City	State	Zip Code	М	D	Y	Amount
Columbus	ОН	43221	0 7	1 4	1 7	50.00
Full Name of Contributor		<u> </u>		ation Num		
Carpenters Local Union 200 PCE			PC	E		
Street Address	Employer Occup	oation/Labor Organization*		•		Form (Cash, Check, etc.)
1545 Alum Creek Dr)					Check
City	State	Zip Code	М	D	Y	Amount
Columbus	ОН	43209	0.7	2 6	1 7	250.00
Full Name of Contributor			Registra	ation Num		
Matt Koppitch						
Street Address	Employer Occup	pation/Labor Organization*		_		Form (Cash. Check, etc.)
705 Whithorn Ct	1	-				Check
City	State	Zip Code	М	D	Y	Amount
Westerville	ОН	43081	0 7	2 6	1 7	25.00
1,000111110		1 20002	/	<u> </u>		

Page Total \$ 1,025.00

^{*} 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)]