



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Burriss					
Full Name of Contributor Michael Corey				Registration Number, if PAC	
Street Address 256 Lansing Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 10/16/2019	Amount 50.00	
Full Name of Contributor Martin Cordero				Registration Number, if PAC	
Street Address 1610 McCoy Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/16/2019	Amount 150.00	
Full Name of Contributor Katarina Cochrane-Yamaguchi				Registration Number, if PAC	
Street Address 2258 Cranford Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/16/2019	Amount 50.00	
Full Name of Contributor Carla Carvalho				Registration Number, if PAC	
Street Address 2632 Venturi House		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43219	Date (MM/DD/YYYY) 10/16/2019	Amount 50.00	
Full Name of Contributor Jessica Carpenter				Registration Number, if PAC	
Street Address 5741 Nadler Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 10/16/2019	Amount 100.00	

\*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 also appear. [R.C. 3517.10(B)(4)]