

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Burriss							
Full Name of Contributor Colleen Lowry					Registration Number, if PAC		
Street Address 669 Harley Dr, Apt 5		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43202	M 0 6	D 3 0	Y 1 7	Amount 50.00	
Full Name of Contributor Alicia Berman					Registration Number, if PAC		
Street Address 1720 S Michigan Ave, Apt 2609		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Chicago	State I L	Zip Code 60616	M 0 7	D 0 6	Y 1 7	Amount 25.00	
Full Name of Contributor Kathleen Berry					Registration Number, if PAC		
Street Address 497 Irving Ct		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Tiburon	State C A	Zip Code 94920	M 0 7	D 0 7	Y 1 7	Amount 100.00	
Full Name of Contributor Erin Beck					Registration Number, if PAC		
Street Address 779 W Rich St, #108		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43222	M 0 7	D 1 2	Y 1 7	Amount 50.00	
Full Name of Contributor Christopher Anderson					Registration Number, if PAC		
Street Address 77 Clifton Dr		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Boardman	State O H	Zip Code 44512	M 0 7	D 1 4	Y 1 7	Amount 25.00	
Full Name of Contributor Alexis Penrod					Registration Number, if PAC		
Street Address 1455 Inglis Ave		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43212	M 0 7	D 1 9	Y 1 7	Amount 50.00	
Full Name of Contributor Patrick Higgins					Registration Number, if PAC		
Street Address 720 W 3rd Ave, Apt 305		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43212	M 0 7	D 1 9	Y 1 7	Amount 25.00	
Full Name of Contributor Megan Phelps					Registration Number, if PAC		
Street Address 1459 Westwood Ave		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43212	M 0 7	D 1 9	Y 1 7	Amount 25.00	

* 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 \$ 350.00