



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss				
Full Name of Contributor Brice Barnett			Registration Number, if PAC	
Street Address 89 Township Road 1340		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City South Point	State OH	Zip Code 45680	Date (MM/DD/YYYY) 10/15/2019	Amount 40.00
Full Name of Contributor Steven Andersson			Registration Number, if PAC	
Street Address 1850 Barrington Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/15/2019	Amount 100.00
Full Name of Contributor Rhea Aguinaldo			Registration Number, if PAC	
Street Address 209 Acadia St., Apt B.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City San Francisco	State CA	Zip Code 94131	Date (MM/DD/YYYY) 10/15/2019	Amount 25.00
Full Name of Contributor Daniel White			Registration Number, if PAC	
Street Address 4323 Prairie Loft Way NE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Albuquerque	State NM	Zip Code 87111	Date (MM/DD/YYYY) 10/16/2019	Amount 100.00
Full Name of Contributor Antonia Webb			Registration Number, if PAC	
Street Address 6919 Linbrook Blvd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43235	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)]