



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss				
Full Name of Contributor Jeremiah Thomas			Registration Number, if PAC	
Street Address 2277 Fishinger 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 250.00
Full Name of Contributor Morgan Sprosty			Registration Number, if PAC	
Street Address 743 Sauter Lane	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 10/16/2019	Amount 50.00
Full Name of Contributor Aadam Soorma			Registration Number, if PAC	
Street Address 4417 Butler St., Apt 1	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Pittsburgh	State PA	Zip Code 15201	Date (MM/DD/YYYY) 10/16/2019	Amount 25.00
Full Name of Contributor Sean O'Neill			Registration Number, if PAC	
Street Address 3165 North Star 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 Richard Neal			Registration Number, if PAC	
Street Address 982 Jaeger St	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 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)]