

Statement of Contributions Received

Prescribed by Secretary of State 3 05

Name of Committee in Full Citizens for Burriss									
Full Name of Contributor Brad Pyle						Registration Number, if PAC			
Street Address 9157 Oakwood Point			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Westerville	State O H	Zip Code 43082	M 0	D 8	Y 3	Y 1	Y 1	Y 7	Amount 100.00
Full Name of Contributor Hawley Linke						Registration Number, if PAC			
Street Address 3850 Fairlington Dr			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43220	M 0	D 9	Y 0	Y 2	Y 1	Y 7	Amount 25.00
Full Name of Contributor Robert Hamlin						Registration Number, if PAC			
Street Address 1520 Grenoble Rd			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Upper Arlington	State O H	Zip Code 43221	M 0	D 9	Y 0	Y 3	Y 1	Y 7	Amount 175.00
Full Name of Contributor Mallory Griffey						Registration Number, if PAC			
Street Address 5423 N Lydell Ave			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Glendale	State W I	Zip Code 53217	M 0	D 9	Y 0	Y 4	Y 1	Y 7	Amount 50.00
Full Name of Contributor Morgan Sprosty						Registration Number, if PAC			
Street Address 6997 Breckton Pl			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 0	Y 5	Y 1	Y 7	Amount 50.00
Full Name of Contributor Erin Synk						Registration Number, if PAC			
Street Address 63 Hanford St			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43206	M 0	D 9	Y 0	Y 6	Y 1	Y 7	Amount 25.00
Full Name of Contributor Kyle Strickland						Registration Number, if PAC			
Street Address 91 W Starr Ave, Apt F			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43201	M 0	D 9	Y 0	Y 6	Y 1	Y 7	Amount 25.00
Full Name of Contributor Michael Kohr						Registration Number, if PAC			
Street Address 2377 Edington Rd			Employer Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Upper Arlington	State O H	Zip Code 43221	M 0	D 9	Y 0	Y 6	Y 1	Y 7	Amount 50.00

* 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 \$ 500.00