



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss				
Full Name of Contributor Matt McClellan			Registration Number, if PAC	
Street Address 1673 Essex Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 09/17/2019	Amount 50.00
Full Name of Contributor John Lytle			Registration Number, if PAC	
Street Address 4284 Braunton Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/17/2019	Amount 50.00
Full Name of Contributor Jack Guttenberg			Registration Number, if PAC	
Street Address 2280 Canterbury Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 09/17/2019	Amount 150.00
Full Name of Contributor Patricia Cloppert			Registration Number, if PAC	
Street Address 1940 Ridgeview Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 09/17/2019	Amount 75.00
Full Name of Contributor Wanda Carter			Registration Number, if PAC	
Street Address 4347 Castleton Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/17/2019	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)]