

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                         |                   |               |                                                                       |               |               |                             |                                          |                         |  |
|-------------------------------------------------------------------------|-------------------|---------------|-----------------------------------------------------------------------|---------------|---------------|-----------------------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>Citizens for Burriss</b>                |                   |               |                                                                       |               |               |                             |                                          |                         |  |
| Full Name of Contributor<br><b>Antonia C Dippold-Webb</b>               |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>64 E Kelso Rd</b>                                  |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43202</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>0</b>               | <b>7</b>                                 | Amount<br><b>250.00</b> |  |
| Full Name of Contributor<br><b>Troy J Doucet</b>                        |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>700 Stonehenge Pkwy, 2B</b>                        |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Dublin</b>                                                   | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43017</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>0</b>               | <b>7</b>                                 | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Kristin Bryant</b>                       |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>387 Cheyenne Way</b>                               |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |                         |  |
| City<br><b>Reynoldsburg</b>                                             | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43068</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>0</b>               | <b>7</b>                                 | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Chadd Smith</b>                          |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>738 Bryden Rd 1A</b>                               |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43205</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>0</b>               | <b>7</b>                                 | Amount<br><b>40.00</b>  |  |
| Full Name of Contributor<br><b>Russell Goodwin</b>                      |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>376 Binns Blvd</b>                                 |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43204</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>0</b>               | <b>7</b>                                 | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Bret Roberts</b>                         |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>554 W 2nd Ave</b>                                  |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43201</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>               | <b>8</b>                                 | Amount<br><b>5.00</b>   |  |
| Full Name of Contributor<br><b>Sarah A Cherry</b>                       |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>1294 Neil Ave</b>                                  |                   |               | Employer Occupation/Labor Organization*                               |               |               |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43201</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>               | <b>8</b>                                 | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Richard G Dakin &amp; Associates Inc</b> |                   |               |                                                                       |               |               | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>1885 Tewksbury Rd</b>                              |                   |               | Employer Occupation/Labor Organization*<br><b>Refunded 10/18/2017</b> |               |               |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                                 | State<br><b>O</b> | H<br><b>H</b> | Zip Code<br><b>43221</b>                                              | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>               | <b>8</b>                                 | Amount<br><b>50.00</b>  |  |

\* 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)]