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Statement of Contributions Received

Prescribed by Secretary of State 3 05

Name of Committee in Full							
Citizens for Burriss							
Ill Name of Contributor				Registration Number, if PAC			
Normanella Dewille							
Street Address	Employer Occup	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)
2580 Clairmont Ct						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43220	1 0	0 5	1 7		100.00
Full Name of Contributor			Registra	ation Num	ber, if PA	C	
Leslie A Marshall							
Street Address	Employer Occup	Employer Occupation/Labor Organization*				Form (Cash, Ch	eck, etc.)
1838 Arlington Ave						Check	
City	State	Zip Code	М	D	Y	Amount	
Upper Arlington	O H	43212	1 0	0 5	1 7		100.00
Full Name of Contributor	=		Registra	ation Num	ber, if PA	.C	•
Robert Sauter							
Street Address	Employer Occup	Employer Occupation/Labor Organization*				Form (Cash, Ch	eck, etc.)
1135 Regency Dr						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43220		1 2	1 7		25.00
Full Name of Contributor			Registra	ation Num	ber, if PA	.C	
Gerald J Girardi							
Street Address	Employer Occupation/Labor Organization*			Form (Cash,			eck, etc.)
4655 Haymarket Ct						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43220	1 0		1 7		250.00
Full Name of Contributor			Registra	ation Num	iber, if PA	.C	
Susan R Smudz	In t in					E (0.1.0)	
Street Address	Employer Occup	Employer Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4655 Haymarket Ct		Ta: o t		I s	T 1/	Check	
City	State H	Zip Code	M	D	Y	Amount	250.00
Columbus Full Name of Contributor	O H	43220	1 0		1 7		250.00
			Kegisira	ation Num	iber, ii PA	i.C	
Gwynyth L Mislin Street Address	Ir1	ation (Labor Opposite tion)				Form / Cook Ch	aalu ata)
	Employer Occup	Employer Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4450 Haverford Ct	State	Zip Code	М	D	Y	Check Amount	
<u> </u>	O H	43220		1 2			100.00
Columbus Full Name of Contributor	10.11	43220		1 Z			100.00
Tara Ratzel			Registi	ation Ivan	iber, ii i A		
Street Address	Employer Occur	ation/Labor Organization*				Form (Cash, Ch	eck etc.)
2703 Briston Rd	Employer Oceap	Employer Occupation/Labor Organization				Cash	
City	State	Zip Code	М	D	ΙΥ	Amount	
Columbus	ОН	43221	1 0	1	l	Tunoun	20.00
Full Name of Contributor		10221		ation Num		C	20.00
Carolyn T Casper							
Street Address	Employer Occum	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)
2545 Northwest Blvd					Check		
City	State	Zip Code	М	D	Y	Amount	
Upper Arlington	ОН	43221	1 0	$ _{16}$	1 7		100.00
			1 - 0	1 - 0		•	

Page Total \$ 945.00

^{*} 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)]