

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Burriss							
Full Name of Contributor Tanya Lentz					Registration Number, if PAC		
Street Address 2790 Alliston Ct		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43220	M 0	D 9	Y 1 9 1 7	Amount 100.00	
Full Name of Contributor Peter Lytle					Registration Number, if PAC		
Street Address 3269 Ridgewood Dr		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Hilliard	State O H	Zip Code 43026	M 0	D 9	Y 1 9 1 7	Amount 50.00	
Full Name of Contributor Bruce Johnson					Registration Number, if PAC		
Street Address 147 Suffolk Rd		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43221	M 0	D 9	Y 1 9 1 7	Amount 50.00	
Full Name of Contributor Michael Easterday					Registration Number, if PAC		
Street Address 1856 Berkshire Rd		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43221	M 0	D 9	Y 2 0 1 7	Amount 50.00	
Full Name of Contributor Douglas Craven					Registration Number, if PAC		
Street Address 674 River Trace		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Westerville	State O H	Zip Code 43081	M 0	D 9	Y 2 1 1 7	Amount 100.00	
Full Name of Contributor Stella Johnson					Registration Number, if PAC		
Street Address 1359 S 5th St		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43207	M 0	D 9	Y 2 1 1 7	Amount 25.00	
Full Name of Contributor Philippe Viray					Registration Number, if PAC		
Street Address 1520 Slade Ave, Apt 102		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43235	M 0	D 9	Y 2 2 1 7	Amount 150.00	
Full Name of Contributor Gerald Moore					Registration Number, if PAC		
Street Address 1719 North Star Rd		Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43212	M 0	D 9	Y 2 2 1 7	Amount 25.00	

* 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 \$ 550.00