



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss					
Full Name of Contributor Louis Grube				Registration Number, if PAC	
Street Address 9401 Lake Avenue, Apt. 4		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Cleveland	State OH	Zip Code 44102	Date (MM/DD/YYYY) 10/15/2019	Amount 250.00	
Full Name of Contributor Kynthia Droesch				Registration Number, if PAC	
Street Address 2407 Brandon Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/15/2019	Amount 25.00	
Full Name of Contributor Kara Cordero				Registration Number, if PAC	
Street Address 1610 McCoy Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/15/2019	Amount 250.00	
Full Name of Contributor Lacey Connelly				Registration Number, if PAC	
Street Address 231 Nova St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Huntington	State WV	Zip Code 25705	Date (MM/DD/YYYY) 10/15/2019	Amount 50.00	
Full Name of Contributor Kelsey Bye				Registration Number, if PAC	
Street Address 1455 Tamara Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Benicia	State CA	Zip Code 94510	Date (MM/DD/YYYY) 10/15/2019	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 also appear. [R.C. 3517.10(B)(4)]