Statement of Contributions Received

Prescribed by Secretary of State 3 05

Name of Committee in Full						
Citizens for Burriss			-		1 100.	
Full Name of Contributor			Registra	ition Num	ber, if PA	iC.
James Ellesser						
Street Address	Employer Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
280 Moorfield Dr		Terrori		T 5	TV	Cash
City	State O H	Zip Code	M	\int_{0}^{D}	Y	Amount
Gahanna Full Name of Contributor	OH	43230	0 8		1 7 iber, if PA	10.00
			Registra	ation inuii	iber, ii rA	
Julie Tucker Street Address	Employer Occur	nation/Labor Organization*	<u> </u>		_	Form (Cash, Check, etc.)
1 ** **	Employer Occupation/Labor Organization*				1	
2170 Arlington Ave	State	Zip Code	Тм	D	l y	Cash Amount
	1 - 1	43221		1	1	
Columbus Full Name of Contributor	0 H	1 43221	0 8	_	1 7 ber, if PA	10.00
			Registia	HIOH INUIT	iber, ir i A	
Elizabeth O'Brochta	Employer Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
	Employer Occu	pation/Labor Organization				Cash
2217 Arlington Ave	State	Zip Code	Тм	D	Y	Amount
Columbus	OH	43221	0 8		l .	20.00
Full Name of Contributor	10 11	43221			ber, if PA	
Barbara Emery			Registre	icion riun	1001, 11 1 7	
Street Address	Employer Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
1991 Suffolk Rd, Apt 1	Employer occu	Junoi/13001 Organization				Cash
City	State	Zip Code	Тм	D	Y	Amount
Columbus	OH	43221	0 8	1	1 7	20.00
Full Name of Contributor	10	10221			ber, if PA	
Susan McKay						
Street Address	Employer Occur	pation/Labor Organization*	L			Form (Cash, Check, etc.)
1200 Grandview Ave, Apt 304		•				Cash
City	State	Zip Code	M	D	Y	Amount
Columbus	ОН	43212	0 8	2 1	1 7	20.00
Full Name of Contributor					ber, if PA	
Tanya Yepsen						
Street Address	Employer Occu	pation/Labor Organization*			=	Form (Cash, Check, etc.)
1561 Barrington Rd						Cash
City	State	Zip Code	М	D	Y	Amount
Columbus	ОН	43221	0 8	2 1	1 7	7.00
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registra	ation Num	ber, if PA	
Julia Brewer						
Street Address	Employer Occu	oation/Labor Organization*				Form (Cash, Check, etc.)
1577 Barrington Rd						Cash
City	State	Zip Code	M	D	Y	Amount
Columbus	ОН	43221	0.8	2 1	1 7	9.00
Full Name of Contributor			Registra	ation Num	ber, if PA	ı.C
Danielle Poling						
Street Address	Employer Occupation/Labor Organization*				Form (Cash, Check, etc.)	
6710 McVey Blvd						Cash
City	State	Zip Code	M	D	Y	Amount
Columbus	ОН	43235	0 8	2 1	1 7	20.00

Page Total \$	116.00

^{*} 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)]