

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Burris for Trustree									
Full Name of Contributor Thomas McAlister						Registration Number, if PAC			
Street Address 4974 Jackson Pike			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 1	Amount 20.00		
Full Name of Contributor Roger McDaniel						Registration Number, if PAC			
Street Address 2041 Autumn Wind Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 25.00		
Full Name of Contributor Homer McKnight						Registration Number, if PAC			
Street Address 1520Hiner Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Orient	State O	H H	Zip Code 43146	M 0	D 9	Y 2	Amount 50.00		
Full Name of Contributor Ronald Mills						Registration Number, if PAC			
Street Address 3780 Pine Ridge Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Lewis Center	State O	H H	Zip Code 43035	M 0	D 9	Y 2	Amount 50.00		
Full Name of Contributor Don Bowman						Registration Number, if PAC			
Street Address 2362 Stargrass Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 20.00		
Full Name of Contributor Paul Klein						Registration Number, if PAC			
Street Address 6379 Jackson Pike			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 10.00		
Full Name of Contributor John Dubos						Registration Number, if PAC			
Street Address 1048 Pinnacle Club Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 1	D 0	Y 0	Amount 40.00		
Full Name of Contributor Beverly Sexton						Registration Number, if PAC			
Street Address 1339 Borrer Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O	H H	Zip Code 43123	M 1	D 0	Y 0	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 265.00