OFFICE OF THE
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee
Citizens for Burriss

Full Name of Contributor	Registration Number, if PAC
Danielle Blue	

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
1625 Guilford Rd		Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Upper Arlington	OH	43221	09/18/2019	50.00

Full Name of Contributor	Registration Number, if PAC
Denny Wojtanowski	

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
10 Park Drive		Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43209	09/19/2019	50.00

Full Name of Contributor	Registration Number, if PAC
Ronald Solomon	

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
3071 Wareham Road		Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Upper Arlington	OH	43221	09/19/2019	200.00

Full Name of Contributor	Registration Number, if PAC
Mary Beth Smith	

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
2041 Westover Rd		Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Upper Arlington	OH	43221	09/19/2019	100.00

Full Name of Contributor	Registration Number, if PAC
William Saam	

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
4126 Clairmont Rd		Credit Card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Upper Arlington	OH	43220	09/19/2019	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)]

Page Total 450.00