

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Nathan Burd</b>									
Full Name of Contributor <b>Mark A. Potts</b>						Registration Number, if PAC			
Street Address <b>330 Guernsey Avenue</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>OH</b>		Zip Code <b>43204</b>		M <b>0</b>		D <b>8</b>	
						Y <b>2</b>		Amount <b>\$25.00</b>	
Full Name of Contributor <b>David Keseg</b>						Registration Number, if PAC			
Street Address <b>8330 Kesegs Way</b>			Employer/Occupation/Labor Organization* <b>Doctor</b>				Form (Cash, Check, etc.) <b>Online Credit Card</b>		
City <b>Blacklick</b>		State <b>OH</b>		Zip Code <b>43004</b>		M <b>0</b>		D <b>9</b>	
						Y <b>0</b>		Amount <b>\$100.00</b>	
Full Name of Contributor <b>Committee to Elect Brad McCloud</b>						Registration Number, if PAC			
Street Address <b>52 E. Gay Street, PO Box 1008</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>OH</b>		Zip Code <b>43216</b>		M <b>0</b>		D <b>9</b>	
						Y <b>3</b>		Amount <b>\$500.00</b>	
Full Name of Contributor <b>Reynoldsburg Republican Club</b>						Registration Number, if PAC			
Street Address <b>8175 Priestley Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Reynoldsburg</b>		State <b>OH</b>		Zip Code <b>43068</b>		M <b>1</b>		D <b>0</b>	
						Y <b>0</b>		Amount <b>\$200.00</b>	
Full Name of Contributor <b>Family First PAC</b>						Registration Number, if PAC <b>OH-888</b>			
Street Address <b>4288 Armstrong Blvd.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Batavia</b>		State <b>OH</b>		Zip Code <b>45103</b>		M <b>1</b>		D <b>0</b>	
						Y <b>0</b>		Amount <b>\$300.00</b>	
Full Name of Contributor <b>Dana Burd</b>						Registration Number, if PAC			
Street Address <b>478 Nantucket Avenue</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Pickerington</b>		State <b>OH</b>		Zip Code <b>43147</b>		M <b>1</b>		D <b>0</b>	
						Y <b>1</b>		Amount <b>\$100.00</b>	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>						Y	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>						Y	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>						Y	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>						Y	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>						Y	

\* 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 **\$1,225.00**