

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Burriss							
Full Name of Contributor Michaela Burriss						Registration Number, if PAC	
Street Address 1976 Northwest Blvd			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O	H H	Zip Code 43212	M 0	D 1	Y 3	Amount 250.00
Full Name of Contributor Branden Burns						Registration Number, if PAC	
Street Address 576 Brookpointe Cir			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Northfield	State O	H H	Zip Code 44067	M 0	D 2	Y 1	Amount 250.00
Full Name of Contributor Kimberly Novak						Registration Number, if PAC	
Street Address 4924 Strand Rd			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Westerville	State O	H H	Zip Code 43081	M 0	D 2	Y 2	Amount 100.00
Full Name of Contributor Louis Grube						Registration Number, if PAC	
Street Address 939 Perry St, Apt 406			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State O	H H	Zip Code 43215	M 0	D 3	Y 2	Amount 40.00
Full Name of Contributor Jack A Guttenberg						Registration Number, if PAC	
Street Address 2280 Canterbury Rd			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O	H H	Zip Code 43221	M 0	D 3	Y 2	Amount 100.00
Full Name of Contributor Wanda L Carter						Registration Number, if PAC	
Street Address 4347 Castleton Rd			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O	H H	Zip Code 43220	M 0	D 3	Y 2	Amount 100.00
Full Name of Contributor Edward J Sweeney						Registration Number, if PAC	
Street Address 6801 Norbrook Dr			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O	H H	Zip Code 43220	M 0	D 3	Y 2	Amount 50.00
Full Name of Contributor Carole Depaola						Registration Number, if PAC	
Street Address 4944 Buck Thorn Ln			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O	H H	Zip Code 43220	M 0	D 3	Y 2	Amount 250.00

* 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)]