

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Burris for Trustee									
Full Name of Contributor David Koch						Registration Number, if PAC			
Street Address 4565 Hirth Hill Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 100.00			
Full Name of Contributor Mark Rothwell						Registration Number, if PAC			
Street Address 11560 Burro Lane			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 500.00			
Full Name of Contributor William Forrester						Registration Number, if PAC			
Street Address 4673 Clayburn Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 50.00			
Full Name of Contributor Berkley Roach						Registration Number, if PAC			
Street Address 2426 Holton Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 50.00			
Full Name of Contributor Tina Badurina						Registration Number, if PAC			
Street Address 4318 Clayburn Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 50.00			
Full Name of Contributor Stanley Smith						Registration Number, if PAC			
Street Address 5323 Pheasant Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 50.00			
Full Name of Contributor Thomas Custer						Registration Number, if PAC			
Street Address 2695 Woods Cres.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 50.00			
Full Name of Contributor Rene Williams						Registration Number, if PAC			
Street Address 4308 Hoover Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0 8	D 1 5	Y 0 9	Amount 100.00			

* 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 \$ **950.00**