Statement of Contributions Received

Prescribed by Secretary of State 3 05

Name of Committee in Full					-		
Citizens for Burriss	=						
Full Name of Contributor			Registr	ation Num	iber, if PA	C	
Carl D Buenger	le 1 22	2 7 1 0 1 2 1				F (0.1.6) + 1	
Street Address	Employer Occup	oation/Labor Organization*				Form (Cash, Check, etc.)	
4311 Indianapolis Ave, Apt 2021		Ta: 0.1	- 1 ,, -	Т 5	Γ.,	Check	
Calcustons	State	Zip Code	M	D 1 1	Y 1 7	Amount	00
Columbus Full Name of Contributor	O H 43214 0 4 1 1 Registration Numl				1 7		.00
			Registi	ation Nun	ibet, ii r <i>A</i>	C	
Jean S Wentzel Street Address	Employer Occur	pation/Labor Organization*	_		-	Form (Cash, Check, etc.)	
PO Box 20153	Employer occup				Check		
City	State	Zip Code		D	J Y	Amount	
Columbus	OH	43230			1		.00
Full Name of Contributor		1 43230		0 3 ation Num			.00_
Tina Maharath			Registi	ation ivuii	ibel, il i A	C	
Street Address	Employer Occur	pation/Labor Organization*				Form (Cash, Check, etc.)	
6608 Mountain Ash Dr	Employer Occup				Check		
City	State	Zip Code	М	T D	Y	Amount	
Canal Winchester	OH	43110	0° 5	1		250.	ΩΩ
Full Name of Contributor	1 0 11	<u> 1 43110 </u>		ation Num			.00
Thomas F McIndoe			Registi	ation run	ioci, ii i zi	C	
Street Address	Employer Occur	pation/Labor Organization*			-	Form (Cash, Check, etc.)	
1211 Kenbrook Hills Dr	Employer occup				Check		
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43220	0 5		1 7	100.	Ω
Full Name of Contributor	10 11	43220		ation Num			.00
Nadine A Block			1.08.311	ation run			
Street Address	Employer Occur	pation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)	
3175 Tremont Rd, Unit 514	Z.mpioyer occup	anon Euror organication				Check	
City	State	Zip Code	M	Тр	Y	Amount	
Columbus	ОН	43221	0 5	1	1 7	100	00
Full Name of Contributor		10221		ation Num			.00
Julia H Wynn			1				
Street Address	Employer Occup	oation/Labor Organization*			-	Form (Cash, Check, etc.)	
1304 Bluff Ave		•				Check	
City	State	Zip Code	М	D	Y	Amount	
Grandview	ОН	43212	0.5	2 2	1 7	25.	.00
Full Name of Contributor				ation Num			
Phyllis M Elmo			J				
Street Address	Employer Occup	oation/Labor Organization*		•		Form (Cash, Check, etc.)	
482 Piedmont Rd						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43214	0 5	2 2	1 7	<i>7</i> 5.	.00
Full Name of Contributor	-		Registr	ation Num	ber, if PA	С	
Sally W Bloomfield							
Street Address	Employer Occupation/Labor Organization*				Form (Cash, Check, etc.)		
3741 Romnay Rd				Check			
City	State	Zip Code	М	D	Y	Amount	
Columbus	ОН	43220	0 5	2 2	1 7	250.	.00

Page Total \$ 900.00

^{*} 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)]