



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss					
Full Name of Contributor Kristin Bryant				Registration Number, if PAC	
Street Address 387 Cheyenne Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 07/27/2019	Amount 50.00	
Full Name of Contributor Jacqueline Patton				Registration Number, if PAC	
Street Address 417 Glen Echo Circle		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 07/28/2019	Amount 50.00	
Full Name of Contributor Scott Stockman				Registration Number, if PAC	
Street Address 221 S. Sylvan Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43204	Date (MM/DD/YYYY) 07/30/2019	Amount 50.00	
Full Name of Contributor Aaron Stephens				Registration Number, if PAC	
Street Address 2301 Stonehenge Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card	
City East Lansing	State MI	Zip Code 48823	Date (MM/DD/YYYY) 07/30/2019	Amount 10.00	
Full Name of Contributor Jim Prater				Registration Number, if PAC	
Street Address 2000 Malvern Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 07/30/2019	Amount 200.00	

*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)]