



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Burriss				
Full Name of Contributor Duff Dyer			Registration Number, if PAC	
Street Address 1938 Jervis Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/18/2019	Amount 100.00
Full Name of Contributor Joann 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) 10/19/2019	Amount 50.00
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) 10/19/2019	Amount 50.00
Full Name of Contributor Cristina Worrel			Registration Number, if PAC	
Street Address 1945 Beverly Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/19/2019	Amount 100.50
Full Name of Contributor Joanne Strasser			Registration Number, if PAC	
Street Address 106 E Lincoln St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/20/2019	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 also appear. [R.C. 3517.10(B)(4)]