



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Burriss				
Full Name of Contributor Charles A. Harrington			Registration Number, if PAC	
Street Address 2354 Coventry Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 09/27/2019	Amount 50.00
Full Name of Contributor Adam Friedman			Registration Number, if PAC	
Street Address 1292 S. 4th St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 09/27/2019	Amount 75.00
Full Name of Contributor Tanya Lentz			Registration Number, if PAC	
Street Address 2790 Alliston Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/29/2019	Amount 250.00
Full Name of Contributor Mark Lentz			Registration Number, if PAC	
Street Address 2790 Alliston Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/29/2019	Amount 250.00
Full Name of Contributor Letha Pugh			Registration Number, if PAC	
Street Address 360 Olentangy Forest Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 09/30/2019	Amount 50.00

*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)]