



Statement of Contributions Received

Form 31-A ORC 3517.10

Full Name of Committee						
Bexley Citizens for Smooth Streets						
Full Name of Contributor Registration Numb					er, if PAC	
Steven Keyes						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
207 N Drexel	Venmo					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Bexley	ОН	43209	ļ	09/22/2018	250.00	
Full Name of Contributor		<u></u>		Registration Number	er, if PAC	
Linda Sinoway					1	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
122 S Ardmore Rd.	Venmo					
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount	
Bexley	ОН	43209	•	09/27/2018	100.00	
Full Name of Contributor	Registration Numb				er, if PAC	
Marlee Snowdon						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
326 N. Columbia Ave	1				Venmo	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Bexley	OH	43209	10/01/2018		100.00	
Full Name of Contributor	ntributor Registration Numbe					
Elisbeth Hire						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
219 S Columbia Ave	Venmo					
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount	
Bexley	ОН	43209	10/02/2018		50.00	
Full Name of Contributor Registration Number					er, if PAC	
Michael Denison						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
663 Montrose Ave.	Ver				Venmo	
City	State	Zíp Code	Date (MM/DD/YYYY) Ar		Amount	
Bexley	ОН	43209	10/06/2018 35.00			

*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)]

Page Total	535