



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				
Chris Smith for Grandview				
Full Name of Contributor			Registration Number, if PAC	
Don McTigue				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
545 E Town ST				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43215	02/16/2017	100
Full Name of Contributor			Registration Number, if PAC	
John Lacey				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
81 E Pacemont Rd				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43202	02/18/2017	100
Full Name of Contributor			Registration Number, if PAC	
Michael Curtin				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
1370 Cambridge Ave				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Marble Cliff	OH	43212	02/20/2017	100
Full Name of Contributor			Registration Number, if PAC	
Tomma Smith				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
64 Jo Harry Dr				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Fairmont	WV	26554	02/17/2017	100
Full Name of Contributor			Registration Number, if PAC	
Terry Freidenberg				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
1131 W 1st Ave				cash
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Grandview Heights	OH	43212	02/25/2017	100

*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)]