



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Chris Smith for Grandview				
Full Name of Contributor Rachel Winder			Registration Number, if PAC	
Street Address 323 Meadow View Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Powell	State OH	Zip Code 43065	Date (MM/DD/YYYY) 05/01/2017	Amount 50
Full Name of Contributor Terry Freidenberg			Registration Number, if PAC	
Street Address 1131 W 1st Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Grandview Heights	State OH	Zip Code 43212	Date (MM/DD/YYYY) 05/13/2017	Amount 25
Full Name of Contributor Charmaine Mazzei			Registration Number, if PAC	
Street Address One Barrington Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Nitro	State WV	Zip Code 25143	Date (MM/DD/YYYY) 05/15/2017	Amount 100
Full Name of Contributor Jason Phillips			Registration Number, if PAC	
Street Address 140 E North St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/16/2017	Amount 40
Full Name of Contributor Citizens for Stinziano			Registration Number, if PAC	
Street Address 550 E Walnut St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 05/25/2017	Amount 50

*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)]