



**Statement of Contributions Received**

**Form 31-A**  
ORC 3517.10

<b>Full Name of Committee</b> Chris Smith for Grandview				
Full Name of Contributor Dan Hilson			Registration Number, if PAC	
Street Address 4281 Olmsted Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 04/04/2017	Amount 250
Full Name of Contributor Kevin Moffa			Registration Number, if PAC	
Street Address 1026 Harrison Park Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 04/14/2017	Amount 200
Full Name of Contributor Robert Doersam			Registration Number, if PAC	
Street Address 294 Wyandotte Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 04/16/2017	Amount 25
Full Name of Contributor Connie Nolder			Registration Number, if PAC	
Street Address 932 Vicksburg Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 04/18/2017	Amount 50
Full Name of Contributor Lisa Mazzei			Registration Number, if PAC	
Street Address 1492 Willagillespie Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Eugene	State OR	Zip Code 97401	Date (MM/DD/YYYY) 04/19/2017	Amount 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)]