



Statement of Contributions Received

Form 31-A ORC 3517.10

Full Name of Committee		<u> </u>			
Bexley Citizens for Smooth Streets					
Full Name of Contributor Registration Number				er, if PAC	
Lori A. Essman					
Street Address	Employer	Occupation/Labor Or	ganization*	<u> </u>	Form (Cash, Check, etc.)
672 S. Remington Rd.					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Bexley	ОН	43209		10/01/2018	30.00
Full Name of Contributor				Registration Number	er, if PAC
Peter B. Halliday					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
299 Ferry Landing Dr.					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Sanibel	ОН	33957		09/22/2018	50.00
Full Name of Contributor				Registration Number	er, if PAC
Lori Ann Feibel					
Street Address	Employer/	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
218 N. Parkview Ave.	1				Check
City	State	Zip Code	Date (MM/DD/YYYY) 10/04/2018		Amount
Bexley	ОН	43209			500.00
Full Name of Contributor	Registration Numb			er, if PAC	
Ryan Schick					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2366 Bexley Park Road					Venmo
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Bexley	ОН	43209		09/21/2018	5.00
Full Name of Contributor	Registration Numb			er, if PAC	
Rafie Pariser Hurley					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
222 N. Remington Rd.		Venmo			
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Bexley	ОН	43209		09/21/2018	20.00

*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)]

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