Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Chris Smith for Grandview				- <u>-</u> -
Full Name of Contributor Daniel Lacey		-	Registration Number, if	PAC
Street Address 1500 Club View Boulevard	Employer/Occu	upation/Labor Organization	<u> </u>	Form (Cash, Check, etc.) Cash
City Worthington	State OH	Zip Code 43085	M D Y O 8 0 8 1 3	Amount \$20.00
Full Name of Contributor Belinda McCord		·	Registration Number, if	PAC
Street Address 6103 Chestnut Ridge Drive	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43230	0 8 0 B 1 3	Amount \$20.00
Full Name of Contributor Teresa McIntyre		• • •	Registration Number, if PAC	
Street Address 2715 Northmont Drive	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Cash
City Blacklick	State OH	Zip Code 43004	0 8 0 8 1 3	Amount \$20.00
Full Name of Contributor Bridey Thompson			Registration Number, if I	PAC
Street Address 2401 Drewery Avenue	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43202	M D Y 0 8 0 B 1 3	Amount \$20.00
Full Name of Contributor William DeMora			Registration Number, if I	PAC
Street Address 100 Warren Street	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	0 8 0 8 1 3	Amount \$100.00
Full Name of Contributor Michael Sexton			Registration Number, if PAC	
Street Address 984 Highland Street	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43201	M D Y	Amount \$50.00
Full Name of Contributor Susan Allardyce			Registration Number, if F	PAC
Street Address 1348 Lincoln Road	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Grandview Heights	Stajte OH	Zip Code 43212	0 8 0 8 1 3	Amount \$50.00
Full Name of Contributor Michele Stepnoski			Registration Number, if P	
Street Address 196 Spring Flower Way	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Pataskala	State OH	Zip Code 43067	M D Y 3	Amount \$20.00

Page Total \$300.00

^{*} 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)]