



Full Name of Committee No On Issue 6-Grandview Heights Schools				
Full Name of Contributor Nathan D. Fisher			Registration Number, if PAC na	
Street Address 1814 W. First Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online through STRIPE
City Cols.	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/31/2018	Amount 50.00
Full Name of Contributor Ken Webb			Registration Number, if PAC na	
Street Address 1256 W. 2nd Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online pay-Stripe
City Cols.	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/26/2018	Amount 30.00
Full Name of Contributor Craig Berlin			Registration Number, if PAC	
Street Address 1020 2nd Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online pay-Stripe
City Cols.	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/26/2018	Amount 20.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]