



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				
Chris Smith for Grandview				
Full Name of Contributor			Registration Number, if PAC	
Barbara Belville				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
3020 River Thames St				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43221	08/23/2017	50
Full Name of Contributor			Registration Number, if PAC	
George Kalbouss				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
1370 Wyandotte Rd				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Grandview Heights	OH	43212	08/23/2017	50
Full Name of Contributor			Registration Number, if PAC	
Elizabeth Kalbouss				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
1370 Wyandotte Rd				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Grandview Heights	OH	43212	08/23/2017	50
Full Name of Contributor			Registration Number, if PAC	
Steven Gladman				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
175 South 3rd Street				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43215	08/23/2017	50
Full Name of Contributor			Registration Number, if PAC	
Andrew Herf				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
2706 Tremont Rd				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Upper Arlington	OH	43221	08/23/2017	200

*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)]