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## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Chris Smith for Grandview							
Full Name of Contributor  Jason Phillips	Registration Number, if P.	Registration Number, if PAC					
Street Address 140 East North Street	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash			
City Worthington	State OH	Zip Code 43085	M D Y 0 4 1 8 1 3	Amount \$20.00			
Full Name of Contributor  Registration Number, if P  Robin Smith							
Street Address 64 Jo Harry Drive	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Fairmont	State WV	Zip Code 26554	M D Y 3	Amount \$150.00			
Full Name of Contributor  John Lacey  Registration Number, if I							
Street Address 81 East Pacemont Road	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check			
City Columbus	State OH	Zip Code 43202	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Amount \$100.00			
Full Name of Contributor Registration Number, if PAC Mark Dempsey							
et Address Employer/Occupation/Labor Organization 305 Westwood Avenue				Form (Cash, Check, etc.) Cash			
City Grandview Heights	State OH	Zip Code 43212	M D Y 0 4 2 5 1 3	Amount \$30.00			
Full Name of Contributor  Registration Number, if Page 9 Phelps							
Street Address 1046 Kenchester Drive	pation/Labor Organization		Form (Cash, Check, etc.) Check				
City Columbus	State OH	Zip Code 43220	0 4 2 5 1 3	S40.00			
Full Name of Contributor  McTigue & McGinnis- Don McTigue							
Street Address 545 East Town Street	Employer/Occo	ipation/Labor Organization		Form (Cash, Check, etc.) Check			
City Columbus	State OH	Zip Code 43215	M D Y 0 4 2 5 1 3	Amount \$100.00			
Full Name of Contributor Adam Leddy							
Street Address 1008 Urbana Avenue		Form (Cash, Check, etc.) Check					
City Columbus	State OH	Zip Code 43224	M D Y 0 4 2 6 1 3	Amount \$75.00			
Full Name of Contributor  Brian Gilmore  Registration Number, if P							
Street Address 2850 Pontiac Street	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) Check			
City Columbus	State OH	Zip Code 43211	0 4 2 9 1 3	Amount \$40.00			

Page Total \$555.00

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)]