

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Chris Smith for Grandview						
Full Name of Contributor Michael Smith				Registration Number, if PAC		
Street Address 8435 Belleview Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Kansas City	State MO	Zip Code 64114	M 0	D 8	Y 0	Amount \$50.00
Full Name of Contributor Daniel Hilson				Registration Number, if PAC		
Street Address 4281 Olmsted Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New Albany	State OH	Zip Code 43054	M 0	D 8	Y 0	Amount \$25.00
Full Name of Contributor James Benadum				Registration Number, if PAC		
Street Address 2109 Dry Ridge Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Grove City	State OH	Zip Code 43123	M 0	D 8	Y 0	Amount \$20.00
Full Name of Contributor John Benadum				Registration Number, if PAC		
Street Address 235 West Broadway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43214	M 0	D 8	Y 0	Amount \$20.00
Full Name of Contributor Tom St. Pierre				Registration Number, if PAC		
Street Address 260 Medick Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Worthington	State OH	Zip Code 43085	M 0	D 8	Y 0	Amount \$20.00
Full Name of Contributor Anne Vogel				Registration Number, if PAC		
Street Address 195 West 3rd Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43201	M 0	D 8	Y 0	Amount \$20.00
Full Name of Contributor Joseph Lacey				Registration Number, if PAC		
Street Address 207 East 6th Street #305		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Dayton	State OH	Zip Code 45402	M 0	D 8	Y 0	Amount \$20.00
Full Name of Contributor Molly Behre				Registration Number, if PAC		
Street Address 3158 Grey Fox Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Gahanna	State OH	Zip Code 43230	M 0	D 8	Y 0	Amount \$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)]