



Statement of Contributions Received

Form 31-A

Full Name of Committee					ORC 3517.1
Building Worthington's Future					
Full Name of Contributor Elizabeth Drotleff Registration					per, if PAC
Street Address 511 Riley Avenue	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City		T			Check
Worthington	State OH	Zip Code 43085	Date (MM/D	10/07/2019	Amount \$500
Full Name of Contributor James Cleverley Registration Num				Registration Number	er, if PAC
Street Address 7768 Rowles Drive	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43235	Date (MM/Di	10/07/2019	Amount \$500
Full Name of Contributor Macrae Architecture, LLC Registration Numb					er, if PAC
Street Address 74 Orchard Drive	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	Date (MM/DI	D/YYYY) 10/07/2019	Amount \$200
Full Name of Contributor Franklin E. Shepherd Registration Numb					er, if PAC
Street Address 600 Keyes Lane	Employe	er/Occupation/Labo	Form (Cash, Check, etc.) Check		
City Worthington	State OH	Zip Code 43085	Date (MM/DD	D/YYYY) 10/07/2019	Amount \$250
Full Name of Contributor Richard Parker MacDonell					r, if PAC
Street Address 320 Tucker Drive	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	Date (MM/DD	, , , , , , , , , , , , , , , , , , ,	Amount \$250

*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)]

Page Total	\$1700
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