



## Statement of Contributions Received

ORC 3517.10

| Full Name of Committee                     |   |  |                   |                          |                          |  |
|--|---|--|-------------------|--------------------------|--------------------------|--|
| Bucher for Worthington                     |   |  |                   |                          |                          |  |
| Full Name of Contributor Registration Numb |   |  |                   |                          | er, if PAC               |  |
| Dena Sico                                  |   |  |                   |                          |                          |  |
| Street Address                             | Employer/Occupation/Labor Organization* |  |                   | Form (Cash, Check, etc.) |                          |  |
| 936 Oberlin Dr.                            |   | -  |                   |                          | Credit Card              |  |
| City                                       | State                                   | Zip Code   | Date (MM/D        | D/YYY)                   | Amount                   |  |
| Columbus                                   | ОН                                      | 43215  |                   | 9/27/19 50.00            |                          |  |
| Full Name of Contributor                   |   |  | <u> </u>          | Registration Numb        | er, if PAC               |  |
| Chris Henney                               |   |  |                   |                          |                          |  |
| Street Address                             | Employe                                 | r/Occupation/Labor (                                       | Organization*     | Form (Cash, Check, etc.) |                          |  |
| 96 S. Harding Rd.                          |   | Check  |                   |                          |                          |  |
| City                                       | State                                   | Zip Code   | Date (MM/D        | D/YYY)                   | Amount                   |  |
| Columbus                                   | ОН                                      | 43209  |                   | 9/27/19                  | 50.00                    |  |
| Full Name of Contributor                   | <b>L</b>                                | <u>,                                    </u>               |                   | Registration Numb        | er, if PAC               |  |
| Yvonne Lesicko                             |   |  |                   |                          |                          |  |
| Street Address                             | Employer/Occupation/Labor Organization* |  |                   | Form (Cash, Check, etc.) |                          |  |
| 299 Blandford Dr.                          |   |  |                   |                          | Check                    |  |
| City                                       | State                                   | Zip Code   | Date (MM/DD/YYYY) |                          | Amount                   |  |
| Worthington                                | ОН                                      | 43085  |                   | 9/28/19 50.00            |                          |  |
| Full Name of Contributor                   |   |  |                   | Registration Numb        | er, if PAC               |  |
| Tracy Freeman                              |   |  |                   |                          |                          |  |
| Street Address                             | Employer                                | er/Occupation/Labor Organization* Form (Cash, Check, etc.) |                   |                          | Form (Cash, Check, etc.) |  |
| 13250 Sheffield Dr.                        |   | Check  |                   |                          |                          |  |
| City                                       | State                                   | Zip Code   | Date (MM/D        | DYYYY)                   | Amount                   |  |
| Pickerington                               | ОН                                      | 43147  |                   | 10/2/19                  | 50.00                    |  |
| Full Name of Contributor                   |   | <del>damen e</del>   | •                 | Registration Numb        | istration Number, if PAC |  |
| Elizabeth Harsh                            |   |  |                   |                          |                          |  |
| Street Address                             | Employer/Occupation/Labor Organization* |  |                   | Form (Cash, Check, etc.) |                          |  |
| 4721 St. Rt. 203                           |   |  |                   |                          | Check                    |  |
| City                                       | State                                   | Zip Code   | Date (MM/D        | D/YYYY)                  | Amount                   |  |
| Radnor                                     |   | 43066  |                   | 10/2/19                  | 100.00                   |  |

\*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)]

| Page Total | 300.00 | <br> |
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