



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Bucher for Worthington				
Full Name of Contributor Tim Bucher		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 7649 Copper Glen St.	Description of Item or Service In-Kind Contributions Received at a Fund-Raising Ev		Date (MM/DD/YYYY) 5/13/19	Fair Market Value 25.00
City Columbus	State OH	Zip Code 43235	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor Pete Bucher		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 7 E. Riverglen Dr.	Description of Item or Service Printing		Date (MM/DD/YYYY) 5/18/19	Fair Market Value 17.20
City Worthington	State OH	Zip Code 43085	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Peter Bucher		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 7 E. Riveglen Dr.	Description of Item or Service Faxing Fee		Date (MM/DD/YYYY) 5/22/19	Fair Market Value 5.27
City Worthington	State OH	Zip Code 43085	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Peter		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 7 E. Riverglen Dr.	Description of Item or Service Faxing Fee		Date (MM/DD/YYYY) 5/24/19	Fair Market Value 5.27
City Worthington	State OH	Zip Code 43085	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Beth Bucher		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 7649 Copper Glen St.	Description of Item or Service In-Kind Contributions Received at a Fund-Raising Ev		Date (MM/DD/YYYY) 6/26/19	Fair Market Value 305.88
City Columbus	State OH	Zip Code 43235	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and name must be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the employer's name must also appear. [R.C. 3517.10(B)(4)]

Page Total \$ 358.62