



Statement of Contributions Received

Form 31-A ORC 3517.10

Full Name of Committee		<u>.</u> .			
Bucher for Worthington					
_				Registration Number, if PAC	
Jay Peterson					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
714 Bradford Place					Credit Card
City	State	Zip Code	Date (MM/DI	(YYYY)	Amount
Murfreesboro	TN	37130		9/8/19	100.00
Full Name of Contributor				Registration Number	er, if PAC
Melanie Houston					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1336 Lincoln Rd.					Credit Card
City	State	Zip Code	Date (MM/D	DYYYY)	Amount
Grandview	ОН	43212		9/9/19	25
Full Name of Contributor				Registration Numb	er, if PAC
Emily Phillis					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
3056 Sunset Dr.					Credit Card
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Columbus	ОН	43202		9/12/19 100.00	
Full Name of Contributor	me of Contributor Registration Numb				er, if PAC
Victoria Baron					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1682 Wyandotte Rd.					Credit Card
City	State	Zip Code	Date (MM/D	DYYYY)	Amount
Columbus	ОН	43212		9/14/19	25
Full Name of Contributor	*			Registration Numb	er, if PAC
Friends of Martin Sweeney					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
3632 W. 133rd St.		Check			
City	State	Zip Code	Date (MM/D	DMYYY)	Amount
Cleveland	ОН	44111		9/14/19 100.00	

Page Total	350.00

^{*}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)]