



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Building Worthington's Future				
Full Name of Contributor David B. Holcomb			Registration Number, if PAC	
Street Address 195 Tucker Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/11/2019	Amount \$100
Full Name of Contributor Larry Link			Registration Number, if PAC	
Street Address 6901 Ravine Circle	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/12/2019	Amount \$100
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

\*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)]