

Page

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee		· · · · · · · · · · · · · · · · · · ·				
Residents of Worthington, For Worthington						
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·			Registration Numb	er, if PAC	
Mary G. Winter						
Street Address	Employer	/Occupation/Labor Org	_		Form (Cash, Check, etc.)	
6425 Evening St.		retire	•		cheek	
Mary G. Winter Street Address 6425 Evening St. City Worthington	State	Zip Code 43085	Date (MM/DI	07777) Y-2019	# (00. —	
Full Name of Contributor				Registration Numb		
Street Address	Temployer	-/Oscupation/Labor Or	conization*		Form (Cash Chack etc.)	
David W. Robinson Street Address 195 E. Dublin branville Dd City Worthington	Marci	y Enterprises	, Inc.	(owner)	Form (Cash, Check, etc.) electronic	
City	State (C)	Zip Code	Date (MM/DI	D/YYYY)	Amount 25,	
Worthington	Un	4 3083	10-20	9-2017	# ds, -	
Full Name of Contributor Registration Number, if PAC						
Street Address	Employer	r/Occupation/Labor Org	ganization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DI	D/YYY)	Amount	
Full Name of Contributor				Registration Number, if PAC		
Street Address	Employer	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount	
Full Name of Contributor				Registration Numb	Registration Number, if PAC	
Street Address	Employer	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DI	D/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)]

otal \$ /25. —
otal <u>∦</u> /25. —