



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Bucher for Worthington				
Full Name of Contributor Matt Ambrogio			Registration Number, if PAC	
Street Address 2028 Sandown Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 6/18/19	Amount 25.00
Full Name of Contributor Cody Weisbrodt			Registration Number, if PAC	
Street Address 51 W. Brighton Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 6/19/19	Amount 40.00
Full Name of Contributor Jodi Segal			Registration Number, if PAC	
Street Address 6681 Markwood St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 6/24/19	Amount 50.00
Full Name of Contributor Amanda Baseler			Registration Number, if PAC	
Street Address 2130 Chapel Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Fairborn	State OH	Zip Code 45324	Date (MM/DD/YYYY) 6/26/19	Amount 25.00
Full Name of Contributor Andrew Canan			Registration Number, if PAC	
Street Address 3056 Sunset Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 6/26/19	Amount 25.00

*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 165.00