Dogo 2		
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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Nome of Committee in Full							
Name of Committee in Full							
Yes We Can Columbus Full Name of Contributor		<u> </u>	Peristration Number if DAC				
Celia Oberholzer			Registration Number, if PAC				
Street Address	Employer	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
1393 Summit St. Apartment B	Student /	-	iization	Credit			
City	State	Zip Code	Date	Amount			
Columbus	OH	43201	04/03/2019	\$5.00			
Full Name of Contributor	1011	43201	Registration Number, i	L			
Carolyn Carter			108.00.00.00.00.00.00.00.00.00.00.00.00.0				
Street Address	Employer	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
5995 Sedgwick Road		CDI Corporation		Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43235	04/03/2019	\$50.00			
Full Name of Contributor			Registration Number, i				
Rodney Wollam							
Street Address	Employer.	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
1479 Devonhurst Dr		loyed / Not Employed		Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43232	04/03/2019	\$27.00			
Full Name of Contributor		<u></u>	Registration Number, i	f PAC			
Audra Phillips							
Street Address	Employer	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
5289 Eisenhower Road	Midwife / Audra Phillips, C			Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43229	04/03/2019	\$5.00			
Full Name of Contributor			Registration Number, i	f PAC			
Joel Harris	Joel Harris						
Street Address	et Address Employer/Occupation/Labor		rganization* Form (Cash, Check, etc.)				
1101 East 6th Avenue	Water Resource Specialist / State		ite of Montana	Credit			
City	State	Zip Code	Date	Amount			
Helena	MT	59601	04/03/2019	\$5.00			
Full Name of Contributor			Registration Number, i	if PAC			
Anna Klatt							
Street Address	Employer/	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)			
193 East North Broadway			ager / CoverMyMeds				
City	State	Zip Code	Date	Amount			
Columbus	OH	43214	04/03/2019	\$5.00			
Full Name of Contributor			Registration Number,	if PAC			
Merisa Bowers							
Street Address	Employer/Occupation/Labor Organ			Form (Cash, Check, etc.)			
363 Higley Court	<u> </u>			Credit			
City	State	Zip Code	Date	Amount			
Gahanna	ОН	43230	04/03/2019	\$50.00			
Full Name of Contributor			Registration Number,	if PAC			
Kristin Porter			<u> </u>	1			
Street Address	Street Address Employer/Occupation/Labor O			Form (Cash, Check, etc.)			
3 Alexandria Colony Ct. Paralegal / Bricker & Eckle				Credit			
City	State	Zip Code	Date	Amount			
Columbus	LOH	43215	04/03/2019	\$200.00			

Page Total: \$347.00

^{*} 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)]