Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Yes We Can Columbus				CDAC
Full Name of Contributor		Registration Number, if PAC		
Robert Handelman				F (C 1 Charlests)
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
3100 Midgard Road	Not Employed / Not Employed		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	10/09/2019	\$50.00
Full Name of Contributor			Registration Number,	if PAC
Anita Waters				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
148 N. Merkle Road	Professor / Denison University		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43209	10/13/2019	\$20.00
Full Name of Contributor		•	Registration Number,	if PAC
Jubilee Witte				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
180 North Chase Ave	Not Applicable / Not Applicable		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43204	10/14/2019	\$3.00
Full Name of Contributor	Registration Number		if PAC	
Alaina McCleery				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
874 Dennison Ave	Development associate / Ohio environmental counc			l Credit
City	State	Zip Code	Date	Amount
	ОН	43215	10/15/2019	\$15.00
Columbus Full Name of Contributor	1011		Registration Number,	if PAC
Erik Straub	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
Street Address	Sales Director / Ouiby Inc			Credit
8794 Alison Drive Apt A	State	Zip Code	Date	Amount
City	CO	80005	10/15/2019	\$50.00
Arvada		80005	Registration Number	
Full Name of Contributor				•
Isaiah St. John	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
Street Address	Server / Spaghetti Warehouse		Credit	
90 E 8th Ave Apt 3		Zip Code	Date	Amount
City	State	1 '	10/15/2019	\$3.00
Columbus	ОН	43201	Registration Number	
Full Name of Contributor			Registration Number	,
Ethan Goodman	1_ :	10	- Organization*	Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization* Legislative Aide / Ohio House of Representatives			Credit
47 Parsons AVE APT E				Amount
City	State	Zip Code	Date	\$5.00
Columbus	ОН	43215	10/16/2019	
Full Name of Contributor			Registration Numbe	I, II FAC
Alyssa Williams				Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization*			· ·
245 W 4th Ave Apt 3	IT Analyst / Nationwide Insurance			Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	10/18/2019	\$5.00

^{*} 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)]