Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Yes We Can Columbus					
Full Name of Contributor			Registration Number, i	f PAC	
Douglas Todd	т		<u> </u>		
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)	
2343 Hardesty Ct.	Retired / Retired		1	Check	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43202	09/25/2017	\$50.00	
Full Name of Contributor			Registration Number, i	Registration Number, if PAC	
dam Bulizak			<u> </u>	T	
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)	
178 E. Longview Ave	Dean / Hondros College of Nursing			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43202	09/03/2017	\$10.00	
Full Name of Contributor			Registration Number, if PAC		
Adam Parsons					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
370 E. Morrill Ave. None	Systems ?	Specialist / Ohio State	University	Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43207	09/08/2017	\$10.00	
Full Name of Contributor			Registration Number, i	f PAC	
Adam Lignell					
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
4217 Harvard Rd	Sales Associate / Office Depot			Credit	
City	State	Zip Code	Date	Amount	
Lawrence	KS	66049	09/12/2017	\$10.00	
Full Name of Contributor Regis			Registration Number, i	f PAC	
Adam Parsons					
Street Address	Employer/Occupation/Labor Organiz		ization*	Form (Cash, Check, etc.)	
370 E. Morrill Ave.	Systems	Systems Specialist / Ohio State University		Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43207	09/29/2017	\$10,00	
Full Name of Contributor	Registration Numb			f PAC	
Adam Bulizak					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
178 E. Longview Ave	Dean / Hondros College of Nursing		sing	Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43202	10/03/2017	\$10.00	
Full Name of Contributor	<u> </u>		Registration Number, i		
Adam Parsons					
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
370 E. Morrill Ave. None	Systems Specialist / Ohio State Univers			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43207	10/08/2017	\$10.00	
Full Name of Contributor	1	1	Registration Number, i		
Adam Bulizak					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
178 E. Longview Avenue	1	ondros College of Nur		Credit	
City	State	Zip Code	Date	Amount	
Columbus	OH	43202	10/14/2017	\$100.00	

^{*} 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