

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Mark Shanahan			Registration Number, if PAC	
Street Address 3192 Morningside Drive	Employer/Occupation/Labor Organization* Consultant / New Morning Energy LLC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/26/2019	Amount \$50.00
Full Name of Contributor Marla Davis			Registration Number, if PAC	
Street Address 80 E Lakeview Ave	Employer/Occupation/Labor Organization* Occupational Therapist / Encore Rehab		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/26/2019	Amount \$15.00
Full Name of Contributor Alexis Mitchell			Registration Number, if PAC	
Street Address 4190 Woodville Dr.	Employer/Occupation/Labor Organization* admin assistant / Oxford Realty		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43230	Date 09/26/2019	Amount \$5.00
Full Name of Contributor Austin McCabe Juhnke			Registration Number, if PAC	
Street Address 3162 Indianola Ave Apt D	Employer/Occupation/Labor Organization* Lecturer / Ohio State University		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/26/2019	Amount \$10.00
Full Name of Contributor Stephanie Schlie			Registration Number, if PAC	
Street Address 304 East Whittier Street	Employer/Occupation/Labor Organization* Teacher / ESCCO		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 09/26/2019	Amount \$3.00
Full Name of Contributor Gail Burkholder			Registration Number, if PAC	
Street Address 45 Governors Place Apt 15	Employer/Occupation/Labor Organization* Client support / Perceptionist Inc.		Form (Cash, Check, etc.) Credit	
City COLUMBUS	State OH	Zip Code 43203	Date 09/26/2019	Amount \$18.00
Full Name of Contributor Donald Shartzner			Registration Number, if PAC	
Street Address 587 E. Royal Forest Blvd	Employer/Occupation/Labor Organization* Attorney / Franklin County Public Defender		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214	Date 09/27/2019	Amount \$90.00
Full Name of Contributor Beth Ramey			Registration Number, if PAC	
Street Address 518 Burnside st apt 1	Employer/Occupation/Labor Organization* Organizer / MSEA		Form (Cash, Check, etc.) Credit	
City Annapolis	State MD	Zip Code 21403	Date 09/27/2019	Amount \$20.00

\* 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)]