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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	Registration Number, if PAC		
Mark Shanahan						
Street Address	Employer/Occupation/Labor Organization*		ganization*	Form (Cash, Check, etc.)		
3192 Morningside Drive	Consultant / New Morning EnergyLLC		EnergyLLC	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	11/26/2019	\$50.00		
Full Name of Contributor			Registration Number, if PAC			
Marla Davis						
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
80 E Lakeview Ave	Occupati	ccupational Therapist / Encore Rehab		Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	11/26/2019	\$15.00		
Full Name of Contributor		<u> </u>	Registration Number	r, if PAC		
Alexis Mitchell						
Street Address	Employer	Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)		
4190 Woodville Dr.	admin as	sistant / Oxford Rea	ılty	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43230	11/26/2019	\$5.00		
Full Name of Contributor		<u></u>	Registration Number	r, if PAC		
Austin McCabe Juhnke						
Street Address	Employer	Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)		
3162 Indianola Ave Apt D	Lecturer / Ohio State University		Credit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	11/26/2019	\$10.00		
Full Name of Contributor			Registration Number	r, if PAC		
Gail Burkholder						
Street Address	Employer/Occupation/Labor Organ		ganization*	zation* Form (Cash, Check, etc.)		
45 Governors Place Apt 15	Client su	pport / Perceptionis	t Inc.	Credit		
City	State	Zip Code	Date	Amount		
COLUMBUS	ОН	43203	11/26/2019	\$18.00		
Full Name of Contributor		<u> </u>	Registration Numbe	gistration Number, if PAC		
Stephanie Schlie						
Street Address	Employer/Occupation/Labor Organization		ganization*	Form (Cash, Check, etc.)		
304 East Whittier Street	Teacher / ESCCO		Credit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43206	11/26/2019	\$3.00		
Full Name of Contributor	<u>*</u>		Registration Numbe	r, if PAC		
Joseph Sommer						
Street Address	Employer	/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)		
5672 Great Hall Court	Not Applicable / Not Applicable		Credit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43231	11/26/2019	\$250.00		
Full Name of Contributor			Registration Numbe	r, if PAC		
Betb Ramey						
Street Address	Employer/Occupation/Labor Organization*		ganization*	Form (Cash, Check, etc.)		
518 Burnside st apt 1	Organize	Organizer / MSEA		Credit		
City	State	Zip Code	Date	Amount		
Annapolis	MD	21403	11/27/2019	\$20.00		

Page Total: \$371.00

^{*} 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)]