D	1
Page	ш

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Ves We Can Columbus				107. 2		
Full Name of Contributor Registration Number, if PAC						
Mark Leone Street Address	Employe	"/Onespection/T-bO	.:,*	F (O L C L L L L L L L		
73 Azud Road	Employer/Occupation/Labor Organization* Self employed / Me		iization* .	Form (Cash, Check, etc.)		
City	State	Zip Code	I p	Credit		
Thompson	CT	·	Date 11/29/2019	Amount \$5.00		
Full Name of Contributor	11.23.2		Registration Number,			
Dorothy Martindale	•	•	Registration Number,	II PAC		
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					
1850 North Star Road Apt 15	Social Worker / NASW Ohio		nzanon .			
City			Date	Credit Amount		
Columbus	OH	43212	11/29/2019	\$5.00		
Full Name of Contributor	On	43212				
Emily Petrik	Registration Number			r, ii PAC		
Street Address	Employer/Occupation/Labor Ourseinstinus					
1101 East 6th Avenue	· · · · · · · · · · · · · · · · · ·		Form (Cash, Check, etc.) Credit			
City	State	Zip Code	Date	Amount		
Helena	MT	59601	11/29/2019	\$5.00		
Full Name of Contributor	17/1	39001	Registration Number,			
Virginia Vogts	· · · · · · · · · · · · · · · · · · ·			11710		
Street Address						
97 WESTWOOD RD	Not Applicable / Not Applicable		•	Credit		
City	State	Zip Code	Date	Amount		
COLUMBUS	ОН	43214	11/29/2019	\$10.00		
Full Name of Contributor	UII.	13211	Registration Number,			
Andrew Maggard						
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)		
1437 1/2 N High St	Senior Operations Planner / LBrands		Brands	Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH.	43201	11/29/2019	\$10.00		
Full Name of Contributor	Registration Number, if PAC					
Larissa Branovacki						
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					
2972 Neil Avenue Apt 192A	Account Coordinator / CoverMyMeds		lyMeds	Credit		
City	State	Zip Code	Date	Amount		
COLUMBUS	ОН	43202	11/29/2019	\$20.00		
Full Name of Contributor	Registration Number		Registration Number,	if PAC		
Michael Daull						
Street Address	1	r/Occupation/Labor Organ		Form (Cash, Check, etc.)		
1704 Oakland Park Ave	Payroll Administrator / The Doyle Group Inc		yle Group Inc	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43224	11/29/2019	\$10.00		
Full Name of Contributor		-	Registration Number,	if PAC		
Michel Coconis						
Street Address	Employe	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
3920 Orange Blossom Lane	line worker / Target Stores Inc. Credit					
City	State	Zip Code	Date	Amount		
Columbus	LOH	43230	11/30/2019	\$10.00		

Page Total: \$75.00

^{*} 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)]