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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, if PAC						
William and Kathleen Todd and Gmeiner								
Street Address	1	Occupation/Labor Organ		Form (Cash, Check, etc.)				
2343 HARDESTY CT	Not Employed / Not Employed			Credit				
City	State	Zip Codc	Date	Amount				
COLUMBUS	OH	43204	11/21/2019	\$40.00				
Full Name of Contributor		Registration Number, if PAC						
Laurel Hobden								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
946 Joos Ave	Delivery / Mushroom Harvest			Credit				
City	State	Zip Code	Date	Amount				
Columbus	OH	43229	11/21/2019	\$10.00				
Full Name of Contributor	<u> </u>	<u> </u>	Registration Number,	f PAC				
Kristin Porter								
Street Address	Employer	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)				
773 Alexandria Colony Court	Paralegal / Bricker & Eckler LLP		LP .	Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43215	11/22/2019	\$15.00				
Full Name of Contributor			Registration Number, i					
Gary Witte			, and the second					
Street Address	Employer	/Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)				
180 N. Chase Ave		licable / Not Applicabl						
City	State	Zip Code	Date	Amount				
Columbus	OH	43204	11/22/2019	\$15.00				
Full Name of Contributor	011	13204	Registration Number,					
Cathy Moore								
Street Address	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)					
1976 Diamondback Drive	Secretary / Hilliard City Schools			Credit				
City	State	Zip Code	Date	Amount				
Powell	OH	43065	11/22/2019	\$5.00				
Full Name of Contributor	OII	43003		<u>, </u>				
Kurt Bateman Street Address	Employee	/Occupation/Labor Organ	*	Form (Cook Charle etc.)				
31.777.773	1	-		Form (Cash, Check, etc.)				
498 Enfield Road	1	licable / Not Applicabl		Credit				
Colombia	State	Zip Code	Date	Amount				
Columbus	OH	43209	11/22/2019	\$20.00				
Full Name of Contributor		Registration Number,	if PAC					
Abby Vaile			<u> </u>	I				
Street Address	. ,			Form (Cash, Check, etc.)				
433 Fairlawn Dr	Not Applicable / Not Applicable			Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43214	11/22/2019	\$27.00				
Full Name of Contributor			Registration Number,	if PAC				
Karyn Deibel	, 		<u> </u>					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
166 W Como Ave	Trager Practitioner / Self Credit							
City	State	Zip Code	Date	Amount				
Columbus	OH	43202	11/23/2019	\$25.00				

Page Total: \$157.00

^{*} 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)]