

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Drew Ullman			Registration Number, if PAC	
Street Address 561 Mohawk Street	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 04/06/2019	Amount \$10.00
Full Name of Contributor Helen Stewart			Registration Number, if PAC	
Street Address 1271 Summit Street Apt T	Employer/Occupation/Labor Organization* Outreach Manager / Ohio Voice		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 04/06/2019	Amount \$10.00
Full Name of Contributor Will Petrik			Registration Number, if PAC	
Street Address 2992 Bremen St	Employer/Occupation/Labor Organization* Grants Associate / Local Matters		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43224	Date 04/06/2019	Amount \$15.00
Full Name of Contributor Nora Berardi			Registration Number, if PAC	
Street Address 78 West Rathbone Avenue	Employer/Occupation/Labor Organization* Specialist / Huntington Not Bank		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 04/06/2019	Amount \$5.00
Full Name of Contributor Adam Parsons			Registration Number, if PAC	
Street Address 691 Frebis Ave	Employer/Occupation/Labor Organization* Data & Digital Director / Ohio Voice		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 04/06/2019	Amount \$20.00
Full Name of Contributor Jessica Patton			Registration Number, if PAC	
Street Address 3070 Sunset Drive	Employer/Occupation/Labor Organization* Circulation Team Lead / Worthington Public Library		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 04/07/2019	Amount \$5.00
Full Name of Contributor Noreen Warnock			Registration Number, if PAC	
Street Address 128 Clinton Heights Ave	Employer/Occupation/Labor Organization* Co-founder & Director of Community Outreach / Local Matters		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 04/07/2019	Amount \$10.00
Full Name of Contributor Lee Pepper			Registration Number, if PAC	
Street Address 3087 Neil Avenue	Employer/Occupation/Labor Organization* Massage Therapist / Lee Pepper, LMT		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 04/07/2019	Amount \$10.00

* 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)]