

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Deborah Steele			Registration Number, if PAC	
Street Address 2081 Radnor Avenue	Employer/Occupation/Labor Organization* Interim Executive Director / Stonewall Columbus		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43224	Date 06/29/2018	Amount \$5.00
Full Name of Contributor Deborah Crawford			Registration Number, if PAC	
Street Address 33 Glencoe Rd.	Employer/Occupation/Labor Organization* Grant writing consultant / self-employed		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 06/29/2018	Amount \$20.00
Full Name of Contributor Michel Coconis			Registration Number, if PAC	
Street Address 3920 Orange Blossom Lane	Employer/Occupation/Labor Organization* line worker / Target Stores Inc.		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43230	Date 06/30/2018	Amount \$10.00
Full Name of Contributor Michael Nau			Registration Number, if PAC	
Street Address 728 Euclaire	Employer/Occupation/Labor Organization* Researcher / OSU		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43209	Date 06/30/2018	Amount \$10.00
Full Name of Contributor Benjamin Tannenwald			Registration Number, if PAC	
Street Address 986 Rear Pennsylvania Avenue	Employer/Occupation/Labor Organization* Physicist / OSU		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 06/30/2018	Amount \$8.88
Full Name of Contributor Alison Grover			Registration Number, if PAC	
Street Address 95 Foxcroft Road	Employer/Occupation/Labor Organization* Physician / Masonicare		Form (Cash, Check, etc.) Credit	
City West Hartford	State CT	Zip Code 6119	Date 06/30/2018	Amount \$10.00
Full Name of Contributor Merisa Bowers			Registration Number, if PAC	
Street Address 363 Higley Court	Employer/Occupation/Labor Organization* Attorney / Self		Form (Cash, Check, etc.) Credit	
City Gahanna	State OH	Zip Code 43230	Date 06/30/2018	Amount \$50.00
Full Name of Contributor Barbara Schmitzer			Registration Number, if PAC	
Street Address 320 Rosslyn ave	Employer/Occupation/Labor Organization* Social worker / Southeast inc		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 06/30/2018	Amount \$5.00

* 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)]