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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				
Paige Emling	T		<u> </u>			
Street Address	Employer/Occupation/Labor Organ			Form (Cash, Check, etc.)		
1499 Menlo Place	Librarian / St. Joseph Montes		T	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43203	09/03/2017	\$10.00		
Full Name of Contributor			Registration Number, if PAC			
Paige Emling			<u>t</u>			
Street Address	Employer/Occupation/Labor Organ			Form (Cash, Check, etc.)		
1499 Menlo Place	Librarian / St. Joseph Montessori School			Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43203	10/03/2017	\$10.00		
Full Name of Contributor	Reg		Registration Number, if PAC			
Pallavi Mandiga						
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)		
1171 Neil Avenue	leil Avenue Physician / Copc			Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43201	09/02/2017	\$10.00		
Full Name of Contributor		-	Registration Number, i	f PAC		
Patricia Boyer	<u></u>					
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)		
2048 QUEENS RD W	Not Empl	loyed / Not Employed		Credit		
City	State	Zip Code	Date	Amount		
CHARLOTTE	NC	28207	09/19/2017	\$50.00		
Full Name of Contributor			Registration Number, i	f PAC		
patricia MEIBURG						
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)		
904 Aries Dr	manager	mager / alliance data		Credit		
City	State	Zip Code	Date	Amount		
Gahanna	ОН		10/09/2017	\$15.00		
Full Name of Contributor		<u> </u>	Registration Number, i	f PAC		
Patrick Higgins						
Street Address Employer/Occupation/Labor		Occupation/Labor Organ	anization* Form (Cash, Check, etc.)			
720 West 3rd Avenue Apt. 305	t. 305 Attorney / Ohio Poverty Lav		enter	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43212	10/08/2017	\$25.00		
Full Name of Contributor	<u></u>	<u>'</u>	Registration Number, i	f PAC		
Puja Datta						
		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
2305 Meadow village drive	Team lead / Equifax inc			Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43235	09/08/2017	\$10.00		
Full Name of Contributor	<u></u>		Registration Number, i			
Puja Datta						
Street Address Employer/Occupation/Labor Organ		ization*	Form (Cash, Check, etc.)			
305 Meadow village drive Team lead / Equifax inc			Credit			
City	State	Zip Code	Date	Amount		
Columbus	OH	13235	10/08/2017	\$10.00		

Page Total: \$140.00

<sup>\*</sup> 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)]