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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	ll Name of Contributor		Registration Number, if PAC			
Lee Pepper	Τ		<u> </u>			
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
3087 Neil Avenue	Massage Therapist / Lee Pepper, LMT			Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	02/07/2019	\$10.00		
Full Name of Contributor			Registration Number, if PAC			
Leo Simpson			<u> </u>			
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
910 Boscastle Ct B	Print Associate / Office Depot			Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43214	02/07/2019	\$5.00		
Full Name of Contributor			Registration Number,	if PAC		
Colleen Dempsey						
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
1468 Wilson Ave	Social Worker / NASW-OH			Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43206	02/07/2019	\$15.00		
Full Name of Contributor	Registration Number		if PAC			
Jennifer Gable						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
133 S Cypress Ave	Non-profit Management / ECDI		DI	Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43222	02/08/2019	\$5.00		
Full Name of Contributor			Registration Number,	if PAC		
Edward Sauer						
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
263 W North Broadway	Farmer / Sunsprout Farms			Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43214	02/08/2019	\$5.00		
Full Name of Contributor Registration Number,		if PAC				
Alexander Stigler			T= (0.1.0)			
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
1803 N 4th Street	Program Coordinator / Columbus State Community College		Credit			
City	State	Zip Code	Date	Amount		
City Columbus	OH	43201	02/08/2019	\$27.00		
Full Name of Contributor	JOH	43201	Registration Number,			
			regionation Hamber,			
Mark Allison Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)						
Street Address	Information Technology / Ohio Education		Credit			
815 Eddystone Ave	Association Association		Cicuit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43224	02/08/2019	\$27.00		
Full Name of Contributor			Registration Number,	if PAC		
Mary Jo Kilroy						
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
3100 Midgard Road	Lawyer / Mary Jo Kilroy		Credit			
City	State	Zip Code	Date	Amount		
	OH	13202	02/08/2019	\$10.00		

Page Total: \$104.00

^{*} 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)]