Page

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		
Emily Petrik			<u> </u>	,	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1101 East 6th Avenue	Teacher / Helena Public Schools			Credit	
City	State	Zip Code	Date	Amount	
Helena	MT	59601	10/29/2019	\$5.00	
Full Name of Contributor	Registration Number, i	f PAC			
Larissa Branovacki					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2972 Neil Avenue Apt 192A	Account Coordinator / CoverMyMeds			Credit	
City	State	Zip Code	Date	Amount	
COLUMBUS	ОН	43202	10/29/2019	\$20.00	
Full Name of Contributor	Registration Num			f PAC	
Andrew Maggard					
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)	
1437 1/2 N High St	Senior Operations Planner / LBrands		rands	Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43201	10/29/2019	\$10.00	
Full Name of Contributor			Registration Number, i	f PAC	
Michael Daull					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1704 Oakland Park Ave	Payroll Administrator / The Doyle Group Inc			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43224	10/29/2019	\$10.00	
Full Name of Contributor Registration Number				f PAC	
Michel Coconis					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
3920 Orange Blossom Lane	line worker / Target Stores Inc.			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43230	10/30/2019	\$10.00	
Full Name of Contributor	Registration Numb			f PAC	
Benjamin Tannenwald					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
986 Rear Pennsylvania Avenue	Physicist / OSU			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43201	10/30/2019	\$8.88	
Full Name of Contributor			Registration Number, i	f PAC	
Kevin Truitt					
Street Address	Employer	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)	
199 West 3rd Avenue	Attorney / Disability Rights Ohio		io	Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43201	10/30/2019	\$5.00	
Full Name of Contributor	'	<u> </u>	Registration Number, i		
Raphael Davis-Williams					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2794 Berrell Ave	Attorney / Spater & Davis-Williams LLC			Credit	
City	State	Zip Code	Date	Amount	
Columbus	OH	43211	10/30/2019	\$5.00	

Page Total: \$73.88

^{*} 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)]