P	a	ø	e	6

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	Registration Number, if PAC						
Austin Hill	****							
Street Address		er/Occupation/Labor C	_	Form (Cash, Check, etc.)				
93 East Welch Avenue	Directo	r / Refuge Ministrie		Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43207	09/05/2019	\$5.00				
Full Name of Contributor	Registration Number, if PAC							
Mary Lou Langenhop								
Street Address	· · · · · · · · · · · · · · · · · · ·		-	Form (Cash, Check, etc.)				
2617 Glen Echo Dr.	Not Ap	Not Applicable / Not Applicable		Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43202	09/05/2019	\$100.00				
Full Name of Contributor			Registration Number	er, if PAC				
Mary Louise Hawkins								
Street Address	Employe	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)				
5649 Balkan Place	Not Ap	plicable / Not Appl	icable	Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43231	09/05/2019	\$3.00				
Full Name of Contributor			Registration Number	er, if PAC				
Rodney Wollam								
Street Address	Organization*	Form (Cash, Check, etc.)						
1479 Devonhurst Dr		plicable / Not Appl		Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43232	09/05/2019	\$27.00				
Full Name of Contributor	Registration Numb	Registration Number, if PAC						
Will Klatt								
eet Address Employer/Occupation/Labor O			Organization*	Form (Cash, Check, etc.)				
80 East Lakeview Avenue	Union organizer / Ohio Education Association			Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43202	09/06/2019	\$25.00				
Full Name of Contributor				egistration Number, if PAC				
Helen Stewart								
Street Address		er/Occupation/Labor	Organization*	Form (Cash, Check, etc.)				
1271 Summit Street Apt T	Outreach Manager / Ohio V		=	Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43201	09/06/2019	\$10.00				
Full Name of Contributor			Registration Numb	per, if PAC				
Will Petrik			L					
Street Address								
2992 Bremen St		Associate / Local N		Credit				
City	State	Zip Code	Date	Amount				
Columbus	ОН	43224	09/06/2019	\$15.00				
Full Name of Contributor		Registration Number, if PAC						
Nora Berardi								
Street Address				Form (Cash, Check, etc.)				
78 West Rathbone Avenue	1	alist / Huntington No		Credit				
City	State	Zip Code	Date	Amount				
Columbus	OH	43214	09/06/2019	\$5.00				
Columbus								

^{*} 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)]