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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			
Tarin Norris					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
105 Mill Race Road	Registered nurse / Mount Carmel			Credit	
City	State	Zip Code	Date	Amount	
Granville	ОН	43023	04/08/2019	\$5.00	
Full Name of Contributor			Registration Number, if PAC		
Carol Rini					
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)	
8201 Lake Bluff Court	Not Applicable / Not Applicable			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43235	04/08/2019	\$10.00	
Full Name of Contributor			Registration Number,	ifPAC	
Krista Faist					
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)	
519 Midgard Rd		s Coordinator / YWC		Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43202	04/09/2019	\$10.00	
Full Name of Contributor	<u> </u>	1	Registration Number		
Brian Meyers					
Street Address Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)		
138 Long Street	Mechanic / COTA			Credit	
City	State	Zip Code	Date	Amount	
Ashville	OH	43103	04/09/2019	\$4.00	
Full Name of Contributor	1 011	1.5105	Registration Number		
Shane Wealti					
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)	
441 Cherrington Road	Project Manager / Mountain Leverage			Credit	
City	State	Zip Code	Date	Amount	
Westerville	OH	43081	04/09/2019	\$100.00	
Full Name of Contributor	1 011	.5001	Registration Number		
Jonathan Beard					
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)	
1815 Franklin Park South	Real estate/consulting / Jonathan Beard			Credit	
City	State	Zip Code	Date	Amount	
1 *	OH	43205	04/11/2019	\$10.00	
Columbus Full Name of Contributor	J OII	73203	Registration Number		
			1.0613tration 14miles	,	
Anita Waters Street Address	Employee	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)	
	Employer/Occupation/Labor Organization* Professor / Denison University			Credit	
148 N. Merkle Road	+	Zip Code	Date	Amount	
City	State	1 *	04/13/2019	\$20.00	
Columbus Full Name of Contributor	ОН	43209			
Full Name of Contributor Registration Number, if PAC					
John Russell	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
Street Address	Employer/Occupation/Labor Organization*		HIZALIUH '	Credit	
10271 Gorsuch Road	Farmer / Fall Creek Farm State Zip Code Date		Data	Amount	
City	State	I '	l .		
Galena	OH	43021	04/13/2019	\$10.00	

Page Total: \$169.00

^{*} 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)]