P	age	1	4

## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

			<del></del>			
Name of Committee in Full						
Yes We Can Columbus Full Name of Contributor			In the Notice Notice 1			
			Registration Number, i	I PAC		
Jonathan Beard Street Address	T	, , , , , , , , , , , , , , , , , , ,	<u> </u>			
	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
1815 Franklin Park S	Self / Real Estate		T =-	Cash		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43205	10/18/2017	\$15.00		
Full Name of Contributor			Registration Number, if PAC			
Joseph Klatt	1					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
345 Walhalla Road	Environmental Specialist / State of Ohio		Credit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	10/06/2017	\$100.00		
Full Name of Contributor			Registration Number, if PAC			
Julie Wu				7		
Street Address	_		ation/Labor Organization* Form (Cash, Check, etc.)			
125 W Northwood Ave		loyed / Not Employed				
City	State	Zip Code	Date	Amount		
Columbus	ОН	43201	09/02/2017	\$5.00		
Full Name of Contributor	ributor Reg		Registration Number, i	f PAC		
Julie Mickley						
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
2790 Indianola Avenue	Real esta	· · · · · · · · · · · · · · · · · · ·		Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	09/16/2017	\$250.00		
Full Name of Contributor Registration Number, if PAC						
Justin Fitch						
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
2932 Oaklawn Street	Teacher /	Dublin City Schools	T	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43224	09/10/2017	\$25.00		
Full Name of Contributor Registration Number, if PAC						
Justin Fitch						
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
2932 Oaklawn Street		Dublin City Schools		Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43224	10/10/2017	\$25.00		
Full Name of Contributor	ntributor		Registration Number, if PAC			
Karl Rusnak						
Street Address		Occupation/Labor Organ		Form (Cash, Check, etc.)		
240 W Pacemont Rd	Account Manager / FWD Creative		ive	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	10/06/2017	\$10.00		
, c		Registration Number, i	f PAC			
Karyn Deibel						
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
166 W Como Ave		ger Practitioner / Self Credit				
City	State	Zip Code	Date	Amount		
Columbus	ОН	43202	10/15/2017	\$23.00		

<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