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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			
Calvin Fisher						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
4461 Collier Dr	Driver / Nationwide Children's Hospital			Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43230	01/28/2018	\$10.00		
Full Name of Contributor Registr				er, if PAC		
Madeline Stocker	_					
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
824 Sullivant Ave	Consultant / Yes We Can Columbus		Credit			
City	State	Zip Code	Date	Amount		
Columbus	ОН	43223	01/29/2018	\$15.00		
Full Name of Contributor			Registration Number, if 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	01/30/2018	\$10.00		
Full Name of Contributor			Registration Number	er, if PAC		
Michael Nau						
Street Address			rganization*	Form (Cash, Check, etc.)		
728 Euclaire	Researcher / OSU		•	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43209	01/30/2018	\$10.00		
Full Name of Contributor Registration Nur						
Benjamin Tannenwald				,		
Street Address				Form (Cash, Check, etc.)		
986 Rear Pennsylvania Avenue	Physicist / OSU		Credit			
City	State	Zip Code	Date	Amount		
Columbus	OH	43201	01/30/2018	\$8.88		
Full Name of Contributor	1011	15201	Registration Number			
Madeline Stocker						
Street Address Employer/Occupation/Labor Organization* Form (Cash, Check						
824 Sullivant Ave	Consultant / YWC		Credit			
City	State	Zip Code	Date	Amount		
Columbus	OH	43223	01/31/2018	\$2.22		
Full Name of Contributor	On	43223	Registration Number			
				a, ii i AC		
Alison Grover Street Address	Employe	-/Occupation/Labor O	ranization*	Form (Cash, Check, etc.)		
	Employer/Occupation/Labor Organization*			, , , , , ,		
95 Foxcroft Road	Physician / Masonicare State Zip Code Date		Credit Amount			
City	State	1 -	01/31/2018			
West Hartford	CT	6119		\$10.00		
Full Name of Contributor			Registration Numb	er, ii PAC		
Ralph Stocker						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
380 Broad St		ployed / Not Emplo		Credit		
City	State	Zip Code	Date	Amount		
Windsor	CT	6095	02/01/2018	\$10.00		

Page Total: \$76.10

<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 aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]