

Statement of Contributions Received
Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Benjamin Kile			Registration Number, if PAC	
Street Address 874 Dennison Ave	Employer/Occupation/Labor Organization* Business Analyst / Mr.		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43215	Date 04/24/2018	Amount \$25.00
Full Name of Contributor Duane Casares			Registration Number, if PAC	
Street Address 112 Aldrich Rd	Employer/Occupation/Labor Organization* CEO / Directions for Youth & Families		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 04/24/2018	Amount \$50.00
Full Name of Contributor Kayla Merchant			Registration Number, if PAC	
Street Address 709 East Kossuth Street	Employer/Occupation/Labor Organization* Compliance Manager / DHL Supply Chain		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 04/24/2018	Amount \$15.00
Full Name of Contributor Isaiah St. John			Registration Number, if PAC	
Street Address 90 E 8th Ave Apt 3	Employer/Occupation/Labor Organization* Server / Spaghetti Warehouse		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 04/24/2018	Amount \$10.00
Full Name of Contributor Martin Brown			Registration Number, if PAC	
Street Address 162 E 2nd Ave	Employer/Occupation/Labor Organization* Office Specialist / OhioHealth		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 04/25/2018	Amount \$10.00
Full Name of Contributor Mark Shanahan			Registration Number, if PAC	
Street Address 3192 Morningside Drive	Employer/Occupation/Labor Organization* Consultant / New Morning EnergyLLC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 04/26/2018	Amount \$50.00
Full Name of Contributor Marla Davis			Registration Number, if PAC	
Street Address 80 E Lakeview Ave	Employer/Occupation/Labor Organization* Occupational Therapist / Encore Rehab		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 04/26/2018	Amount \$15.00
Full Name of Contributor Alexis Mitchell			Registration Number, if PAC	
Street Address 4190 Woodville Dr.	Employer/Occupation/Labor Organization* admin assistant / Oxford Realty		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43230	Date 04/26/2018	Amount \$5.00

* 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)]