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		
			Registration Number,	II PAC	
Farrell Brody Street Address	T	(O	::	T(0, 1, Cl, 1, 1, 1)	
	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)	
103 W. California Ave.	Not employed / Not employed State Zip Code Date		I n	Credit	
City	State	Zip Code	Date	Amount	
Columbus Full Name of Contributor	ОН		10/03/2017	\$5.00	
			Registration Number,	II PAC	
Georgi Grover Street Address	T = 1	/O	1 *		
	Employer/Occupation/Labor Organizat		ization*	Form (Cash, Check, etc.)	
64 Blue Ridge Rd	Front desk / Mountain Top Inn State Zip Code Date		T5-4-	Credit	
City	State	I -	Date	Amount	
Chittenden	VT	5737	10/02/2017	\$50.00	
Full Name of Contributor	i e e e e e e e e e e e e e e e e e e e			Registration Number, if PAC	
Glenn Waring	1	10 7.1	<u> </u>	Ta (a) a (a)	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2681 Montcalm Rd		r to organizations / Se	T	Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН_	43221	09/24/2017	\$100.00	
Full Name of Contributor	Registration			if PAC	
Hannah Reall			<u> </u>		
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
86 Rosebrook Court	 	Ohio State University	1_	Credit	
City	State	Zip Code	Date	Amount	
Reynoldsburg	ОН	43068	09/01/2017	\$5.00	
			Registration Number,	if PAC	
Hannah Eigerman			<u> </u>		
Street Address	Employer/Occupation/Labor Organization		ization*	Form (Cash, Check, etc.)	
299 Piedmont Rd	1	loyed / Not Employed		Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43214	09/01/2017	\$20.00	
Full Name of Contributor Registration Number				ifPAC	
Herman Arnold					
Street Address	Employer/Occupation/Labor Organization*		nization*	Form (Cash, Check, etc.)	
1925 1st Ave		loyed / Not employed		Credit	
City	State	Zip Code	Date	Amount	
Selma	AL	36703	10/04/2017	\$3.00	
Full Name of Contributor	Registration Number			ifPAC	
Hillary Hopkins			<u></u>		
Street Address		Occupation/Labor Organ		Form (Cash, Check, etc.)	
1285 E Long St	Cafe Manager / One Line Coffee			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43203	09/10/2017	\$50.00	
Full Name of Contributor		· ————	Registration Number,	ifPAC	
Hillary Hopkins					
Street Address	1	Occupation/Labor Organ		Form (Cash, Check, etc.)	
1285 E Long St	Cafe Manager / One Line Coffee		æ	Credit	
City	State	Zip Code	Date	Amount	
Columbus	lон	43203	10/10/2017	\$50.00	

^{*} 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