

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Audra Phillips			Registration Number, if PAC	
Street Address 5289 Eisenhower Road	Employer/Occupation/Labor Organization* Midwife / Audra Phillips, CPM		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43229	Date 09/03/2019	Amount \$5.00
Full Name of Contributor Anna Klatt			Registration Number, if PAC	
Street Address 193 East North Broadway	Employer/Occupation/Labor Organization* UX Manager / CoverMyMeds		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 09/03/2019	Amount \$5.00
Full Name of Contributor Joel Harris			Registration Number, if PAC	
Street Address 1101 East 6th Avenue	Employer/Occupation/Labor Organization* Water Resource Specialist / State of Montana		Form (Cash, Check, etc.) Credit	
City Helena	State MT	Zip Code 59601	Date 09/03/2019	Amount \$5.00
Full Name of Contributor Alyssa Chenault			Registration Number, if PAC	
Street Address 4349 Pillar Drive	Employer/Occupation/Labor Organization* Communications Manager / City of Columbus		Form (Cash, Check, etc.) Credit	
City Grove City	State OH	Zip Code 43123	Date 09/03/2019	Amount \$15.00
Full Name of Contributor Hank Mylander			Registration Number, if PAC	
Street Address 832 Thurber Drive West	Employer/Occupation/Labor Organization* Policy Analyst / Franklin County JFS		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43215	Date 09/03/2019	Amount \$10.00
Full Name of Contributor Liliana Baiman			Registration Number, if PAC	
Street Address 426 Reinhard Ave	Employer/Occupation/Labor Organization* Labor Liason / Central Ohio worker center		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 09/03/2019	Amount \$10.00
Full Name of Contributor Glen Kizer			Registration Number, if PAC	
Street Address 181 N 21st Street	Employer/Occupation/Labor Organization* Work for Foundation / Foundation for Environmental Education		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43203	Date 09/03/2019	Amount \$10.00
Full Name of Contributor Kevin Truitt			Registration Number, if PAC	
Street Address 199 W. 3rd Ave.	Employer/Occupation/Labor Organization* Attorney / Disability Rights Ohio		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 09/04/2019	Amount \$10.00

* 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)]