

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Rebecca Petrik			Registration Number, if PAC	
Street Address 417 24th St NW	Employer/Occupation/Labor Organization* Professor / Minot State University		Form (Cash, Check, etc.) Credit	
City Minot	State ND	Zip Code 58703	Date 09/02/2019	Amount \$18.00
Full Name of Contributor Donald Shartzter			Registration Number, if PAC	
Street Address 587 E. Royal Forest Blvd	Employer/Occupation/Labor Organization* Attorney / Franklin County Public Defender		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214	Date 09/03/2019	Amount \$90.00
Full Name of Contributor Scott Burch			Registration Number, if PAC	
Street Address 1940 Rockdale Dr	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	Date 09/03/2019	Amount \$3.00
Full Name of Contributor Scott Burch			Registration Number, if PAC	
Street Address 1940 Rockdale Dr	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	Date 09/03/2019	Amount \$3.00
Full Name of Contributor Farrell Brody			Registration Number, if PAC	
Street Address 103 W. California Ave.	Employer/Occupation/Labor Organization* Not Employed / Not Employed		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43229	Date 09/03/2019	Amount \$5.00
Full Name of Contributor Charles Lynd			Registration Number, if PAC	
Street Address 1401 Curve Rd	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Delaware	State OH	Zip Code 43015	Date 09/03/2019	Amount \$10.00
Full Name of Contributor Joseph Sommer			Registration Number, if PAC	
Street Address 5672 Great Hall Court	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43231	Date 09/03/2019	Amount \$50.00
Full Name of Contributor Carolyn Carter			Registration Number, if PAC	
Street Address 5995 Sedgwick Road	Employer/Occupation/Labor Organization* Finance / CDI Corporation		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43235	Date 09/03/2019	Amount \$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 aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]