

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Kate Pleuss			Registration Number, if PAC	
Street Address 2440 Glenmawr Avenue	Employer/Occupation/Labor Organization* Worker / Owner / Pattycake Bakery		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/26/2017	Amount \$10.00
Full Name of Contributor Kayla Merchant			Registration Number, if PAC	
Street Address 451 E. Sycamore St. Apt. D	Employer/Occupation/Labor Organization* Compliance / DHL Supply Chain		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 09/08/2017	Amount \$10.00
Full Name of Contributor Kayla Merchant			Registration Number, if PAC	
Street Address 451 E. Sycamore St. Apt. D	Employer/Occupation/Labor Organization* Compliance / DHL Supply Chain		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 10/08/2017	Amount \$10.00
Full Name of Contributor Kelly Nagle			Registration Number, if PAC	
Street Address 561 Mohawk Street	Employer/Occupation/Labor Organization* Assistant Buyer / Lane Bryant		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 10/16/2017	Amount \$10.00
Full Name of Contributor Kevin Truitt			Registration Number, if PAC	
Street Address 199 W. Third Ave.	Employer/Occupation/Labor Organization* Attorney / DRO		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 10/15/2017	Amount \$50.00
Full Name of Contributor Kimberly Miracle			Registration Number, if PAC	
Street Address 277 Farmington Drive	Employer/Occupation/Labor Organization* Manager / Salesforce		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43213	Date 10/16/2017	Amount \$23.00
Full Name of Contributor Krista Faist			Registration Number, if PAC	
Street Address 519 Midgard Rd	Employer/Occupation/Labor Organization* Donations Coordinator / YWCA Columbus		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/09/2017	Amount \$10.00
Full Name of Contributor Krista Faist			Registration Number, if PAC	
Street Address 519 Midgard Rd	Employer/Occupation/Labor Organization* Donations Coordinator / YWCA Columbus		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 10/09/2017	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)]