

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Nora Berardi			Registration Number, if PAC	
Street Address 78 West Rathbone Avenue	Employer/Occupation/Labor Organization* Specialist / Huntington Not Bank		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 11/06/2018	Amount \$10.00
Full Name of Contributor Jessica Patton			Registration Number, if PAC	
Street Address 3070 Sunset Drive	Employer/Occupation/Labor Organization* Circulation Team Lead / Worthington Public Library		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 11/07/2018	Amount \$5.00
Full Name of Contributor Noreen Warnock			Registration Number, if PAC	
Street Address 128 Clinton Heights Ave	Employer/Occupation/Labor Organization* Co-founder & Director of Community Outreach / Local Matters		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 11/07/2018	Amount \$10.00
Full Name of Contributor Vijay Sharma			Registration Number, if PAC	
Street Address 7524 Stone Lake Drive	Employer/Occupation/Labor Organization* Intervention Specialist / Columbus City Schools		Form (Cash, Check, etc.) Credit	
City Dublin	State OH	Zip Code 43016	Date 11/07/2018	Amount \$5.00
Full Name of Contributor Lynn Friedman			Registration Number, if PAC	
Street Address 2971 White Bark Place	Employer/Occupation/Labor Organization* none / none		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code	Date 11/07/2018	Amount \$25.00
Full Name of Contributor Lee Pepper			Registration Number, if PAC	
Street Address 3087 Neil Avenue	Employer/Occupation/Labor Organization* Massage Therapist / Self Employed		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 11/07/2018	Amount \$10.00
Full Name of Contributor Edward Sauer			Registration Number, if PAC	
Street Address 263 W North Broadway	Employer/Occupation/Labor Organization* Farmer / Sunsprout Farms		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 11/08/2018	Amount \$5.00
Full Name of Contributor Jennifer Gable			Registration Number, if PAC	
Street Address 133 S Cypress Ave	Employer/Occupation/Labor Organization* Non-profit Management / ECDI		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43222	Date 11/08/2018	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)]