## **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	
Amy Harkins				,
Street Address	Employer/Occupation/Labor Organization* Form (Cash,			Form (Cash, Check, etc.)
56 E Kanawha Avc	Business Development Director / Employment			Credit
	Enterprises			
City	State	Zip Code	Date	Amount
Columbus	ОН	43214	10/20/2019	\$10.00
Full Name of Contributor			Registration Number, if PAC	
Amy Harkins				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
56 E Kanawha Ave	Business Development Director / Employment Enterprises		Credit	
City	State	Zip Code	Date	Amount
Columbus	он _	43214	10/20/2019	\$10.00
Full Name of Contributor			Registration Number	, if PAC
Keith Chapman				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
4170 West Jefferson Kiousville Rd	Not Applicable / Not Applicable		Credit	
City	State	Zip Code	Date	Amount
London	ОН	43140	10/20/2019	\$5.00
Full Name of Contributor	Registration Numbe		r, if PAC	
William Lyons				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
245 Walhalla Road	Instructor / Columbus State Community College			Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	10/20/2019	\$5.00
Full Name of Contributor Registration Number			r, if PAC	
GENE WIDBY				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
1059 East North Broadway St	canvass	er / Conservation Ohi	0	Credit
City	State	Zip Code	Date	Amount
COLUMBUS	OH	43224	10/20/2019	\$10.00
Full Name of Contributor	e of Contributor Registration Number			r, if PAC
Becky Phillips				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
208 King Ave Apt D	Graduate Research Assistant / The Ohio State University		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	10/20/2019	\$5.00
Full Name of Contributor			Registration Number	r, if PAC
Jennifer Sinnott				
Street Address	Employe	r/Occupation/Labor Org	ganization*	Form (Cash, Check, etc.)
501 W 2nd Ave	Assistant Professor / Ohio State University		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	10/20/2019	\$15.00
Full Name of Contributor	Registration Numbe			r, if PAC
Marian Harris				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
5145 Holbrook Dr	Not Applicable / Not Applicable			Credit
City	State	Zip Code	Date	Amount
Columbus	Он	43232	10/20/2019	\$10.00

Page Total: \$70.00

<sup>\*</sup> 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)]