

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Ryan Branch			Registration Number, if PAC	
Street Address 1385 W. 6th ave Apt C Apt C	Employer/Occupation/Labor Organization* GIS Analyst / Stantec		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43212	Date 11/29/2018	Amount \$15.00
Full Name of Contributor Adam Fazio			Registration Number, if PAC	
Street Address 868 Franklin Ave	Employer/Occupation/Labor Organization* Development Director / Local Matters		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43205	Date 11/29/2018	Amount \$5.00
Full Name of Contributor Sami Eckert			Registration Number, if PAC	
Street Address 1201 Jennifer Drive	Employer/Occupation/Labor Organization* Marketing / Whitemyer Advertising		Form (Cash, Check, etc.) Credit	
City Dover	State OH	Zip Code 44622	Date 11/29/2018	Amount \$10.00
Full Name of Contributor Sharon McEntee- Basa			Registration Number, if PAC	
Street Address 1270 Giel Ave	Employer/Occupation/Labor Organization* IT / Cleveland clinic		Form (Cash, Check, etc.) Credit	
City Lakewood	State OH	Zip Code 44107	Date 11/29/2018	Amount \$5.00
Full Name of Contributor Dorothy Martindale			Registration Number, if PAC	
Street Address 1850 North Star Road Apt 15	Employer/Occupation/Labor Organization* Social Worker / NASW Ohio		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43212	Date 11/29/2018	Amount \$5.00
Full Name of Contributor Audra Sparks			Registration Number, if PAC	
Street Address 6410 Philadelphia Drive	Employer/Occupation/Labor Organization* Educator / Self		Form (Cash, Check, etc.) Credit	
City Dayton	State OH	Zip Code 45415	Date 11/29/2018	Amount \$50.00
Full Name of Contributor Rian McConnell Sr			Registration Number, if PAC	
Street Address 1992 Prince George Dr Apt C	Employer/Occupation/Labor Organization* Maintenance technician / Bexley woods LLC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43209	Date 11/29/2018	Amount \$10.00
Full Name of Contributor Benjamin Leland			Registration Number, if PAC	
Street Address 699 Wetmore Road Apt H	Employer/Occupation/Labor Organization* Grants Admin / OSU		Form (Cash, Check, etc.) Credit	
City COLUMBUS	State OH	Zip Code 43214	Date 11/29/2018	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)]