

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Adam Bulizak			Registration Number, if PAC	
Street Address 178 E Longview Ave	Employer/Occupation/Labor Organization* Dean / Hondros College of Nursing		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 10/27/2019	Amount \$25.00
Full Name of Contributor Calvin Fisher			Registration Number, if PAC	
Street Address 4461 Collier Dr	Employer/Occupation/Labor Organization* Driver / Nationwide Children's Hospital		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43230	Date 10/28/2019	Amount \$10.00
Full Name of Contributor Andrew Meiburg			Registration Number, if PAC	
Street Address 2430 North 4th Street	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 10/28/2019	Amount \$15.00
Full Name of Contributor Molly Petrik			Registration Number, if PAC	
Street Address 5 Glencrest Ave	Employer/Occupation/Labor Organization* Adjunct Faculty / University of New Hampshire		Form (Cash, Check, etc.) Credit	
City Dover	State NH	Zip Code 3820	Date 10/28/2019	Amount \$5.00
Full Name of Contributor Alex D'Amore-Braver			Registration Number, if PAC	
Street Address 111 West 1st Avenue	Employer/Occupation/Labor Organization* Homework Help Center Specialist / Columbus Metropolitan Lbrary		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 10/28/2019	Amount \$5.00
Full Name of Contributor Adam Bulizak			Registration Number, if PAC	
Street Address 178 E. Longview Ave	Employer/Occupation/Labor Organization* Dean Academic Affairs / Hondros College of Nursing		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 10/28/2019	Amount \$25.00
Full Name of Contributor Greg Pace			Registration Number, if PAC	
Street Address 1362 Erickson Avenue	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43227	Date 10/29/2019	Amount \$5.00
Full Name of Contributor Lauren Squires			Registration Number, if PAC	
Street Address 474 Wyandotte Avenue	Employer/Occupation/Labor Organization* Professor / The Ohio State University		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 10/29/2019	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)]