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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Yes We Can Columbus			Registration Number, if PAC				
Full Name of Contributor			Registration Number, in	TAC			
Ralph Stocker Street Address	Emplayer/	Occupation/Labor Organ	retion*	Form (Cash, Check, etc.)			
	1	oved / Not Employed	220011	Credit			
380 Broad St	State	Zip Code	Date	Amount			
City	CT	6095	04/01/2018	\$10.00			
Windsor	CI	6093					
Full Name of Contributor Registration Number, if PAC							
Stuart McIntyre Street Address	Employer/	Oncuration/Labor Organ	igation*	Form (Cash, Check, etc.)			
	Employer/Occupation/Labor Organization*			Credit			
451 E. Tompkins st. B	Community Organizer / Ohio Organizing Credit Collaborative		Credit				
City	State	Zip Code	Date	Amount			
Columbus	ОН	43202	04/01/2018	\$5.00			
Full Name of Contributor	!	^	Registration Number, if	PAC			
Ryan McMullen							
reet Address Emplo		oyer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
1568 Newcomer Rd.	Bartender / The Bottle Shop			Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43235	04/01/2018	\$10.00			
Full Name of Contributor			Registration Number, if PAC				
Barbara Eakins	ra Eakins						
Street Address	Address Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)			
925 Dennison Avenue	Not Employed / Not Employed			Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43201	04/02/2018	\$20.00			
Full Name of Contributor Reg			Registration Number, if	PAC			
Farrell Brody							
Street Address	Employer/Occupation/Labor Organization*		zation*	Form (Cash, Check, etc.)			
103 W. California Ave.	Not employed / Not employed			Credit			
City	State	Zip Code	Date	Amount			
Columbus	OH		04/03/2018	\$5.00			
Full Name of Contributor			Registration Number, if	PAC			
Amanda King							
Street Address	eet Address Employer/Occupation/Labor C		zation*	Form (Cash, Check, etc.)			
62 S Ohio Ave	City Plan	ner / Self		Credit			
City	State	Zip Code	Date	Amount			
Columbus	OH		04/03/2018_	\$10.00			
Full Name of Contributor			Registration Number, if PAC				
Charles Lynd							
reet Address Employer/Occupation/Labor Org		Occupation/Labor Organ	zation*	Form (Cash, Check, etc.)			
1401 Curve Rd	none / none		Credit				
City	State	Zip Code	Date	Amount			
Delaware	ОН	43015	04/03/2018	\$10.00			
Full Name of Contributor	-		Registration Number, if	PAC			
Adam Bulizak							
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)						
178 E. Longview Ave	Dean / Hondros College of Nursing Credit						
City	State	Zip Code	Date	Amount			

Page Total: \$80.00

^{*} 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)]