

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor David Donofrio			Registration Number, if PAC	
Street Address 298 Carilla Ln	Employer/Occupation/Labor Organization* Administrative / Prairie Township		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 	Date 03/08/2019	Amount \$5.00
Full Name of Contributor Tarin Norris			Registration Number, if PAC	
Street Address 105 Mill Race Road	Employer/Occupation/Labor Organization* Registered nurse / Mount Carmel		Form (Cash, Check, etc.) Credit	
City Granville	State OH	Zip Code 43023	Date 03/08/2019	Amount \$5.00
Full Name of Contributor Krista Faist			Registration Number, if PAC	
Street Address 519 Midgard Rd	Employer/Occupation/Labor Organization* Donations Coordinator / YWCA Columbus		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 03/09/2019	Amount \$10.00
Full Name of Contributor Brian Meyers			Registration Number, if PAC	
Street Address 138 Long Street	Employer/Occupation/Labor Organization* Mechanic / COTA		Form (Cash, Check, etc.) Credit	
City Ashville	State OH	Zip Code 43103	Date 03/09/2019	Amount \$4.00
Full Name of Contributor Shane Wealti			Registration Number, if PAC	
Street Address 441 Cherrington Road	Employer/Occupation/Labor Organization* Project Manager / Mountain Leverage		Form (Cash, Check, etc.) Credit	
City Westerville	State OH	Zip Code 43081	Date 03/09/2019	Amount \$100.00
Full Name of Contributor Tim Fulton			Registration Number, if PAC	
Street Address 297 West 4th Avenue	Employer/Occupation/Labor Organization* Consultant / Confluence Consultants		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 03/09/2019	Amount \$25.00
Full Name of Contributor Jonathan Beard			Registration Number, if PAC	
Street Address 1815 Franklin Park South	Employer/Occupation/Labor Organization* Real estate/consulting / Jonathan Beard		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43205	Date 03/11/2019	Amount \$10.00
Full Name of Contributor Anita Waters			Registration Number, if PAC	
Street Address 148 N. Merkle Road	Employer/Occupation/Labor Organization* Professor / Denison University		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43209	Date 03/13/2019	Amount \$20.00

* 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)]