

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Deborah Crawford			Registration Number, if PAC	
Street Address 33 Glencoe Rd.	Employer/Occupation/Labor Organization* Grant writing consultant / Deborah Crawford		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 09/23/2019	Amount \$20.00
Full Name of Contributor Kenneth Myers			Registration Number, if PAC	
Street Address 43 E Kelso Rd	Employer/Occupation/Labor Organization* Not Applicable / Not Applicable		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 09/24/2019	Amount \$15.00
Full Name of Contributor Puja Datta			Registration Number, if PAC	
Street Address 2305 Meadow village drive	Employer/Occupation/Labor Organization* Political Organizer / Working Families Party		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43235	Date 09/24/2019	Amount \$10.00
Full Name of Contributor Benjamin Kile			Registration Number, if PAC	
Street Address 874 Dennison Ave	Employer/Occupation/Labor Organization* Business Analyst / ICC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43215	Date 09/24/2019	Amount \$25.00
Full Name of Contributor Duane Casares			Registration Number, if PAC	
Street Address 112 Aldrich Rd	Employer/Occupation/Labor Organization* CEO / Directions for Youth & Families		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 09/24/2019	Amount \$50.00
Full Name of Contributor Haley Weaver			Registration Number, if PAC	
Street Address 683 Lazelle Rd	Employer/Occupation/Labor Organization* Realtor / Haley Weaver		Form (Cash, Check, etc.) Credit	
City Westerville	State OH	Zip Code 43081	Date 09/24/2019	Amount \$10.00
Full Name of Contributor Martin Brown			Registration Number, if PAC	
Street Address 162 E 2nd Ave	Employer/Occupation/Labor Organization* Office Specialist / OhioHealth		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 09/25/2019	Amount \$10.00
Full Name of Contributor Bryce Sampson			Registration Number, if PAC	
Street Address 245 West 4th Avenue Apt. 3	Employer/Occupation/Labor Organization* Manager / Dempsey's		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 09/25/2019	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)]