

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Chase Irwin			Registration Number, if PAC	
Street Address 1040 Bryden Road	Employer/Occupation/Labor Organization* Account Coordinator / CoverMyMeds		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43205	Date 11/28/2018	Amount \$10.00
Full Name of Contributor Ed Hoffman			Registration Number, if PAC	
Street Address 4167 North High Street	Employer/Occupation/Labor Organization* Bookseller / Self		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43214	Date 11/28/2018	Amount \$25.00
Full Name of Contributor Erin Harris			Registration Number, if PAC	
Street Address 277 Detroit Ave	Employer/Occupation/Labor Organization* Aquatics Director / Self		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43201	Date 11/28/2018	Amount \$10.00
Full Name of Contributor Steven Hudson			Registration Number, if PAC	
Street Address 1466 Orson Drive	Employer/Occupation/Labor Organization* Retailer / Self		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code	Date 11/28/2018	Amount \$10.00
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 11/28/2018	Amount \$5.00
Full Name of Contributor Katy Shanahan			Registration Number, if PAC	
Street Address 38 West Weber Road	Employer/Occupation/Labor Organization* Advocacy Manager / Equitas Health		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 11/28/2018	Amount \$10.00
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 11/28/2018	Amount \$5.00
Full Name of Contributor Alyssa Chenault			Registration Number, if PAC	
Street Address 4349 Pillar Drive	Employer/Occupation/Labor Organization* Communications Manager / NA		Form (Cash, Check, etc.) Credit	
City Grove City	State OH	Zip Code 43123	Date 11/28/2018	Amount \$15.00

* 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)]