

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Mark Allison			Registration Number, if PAC	
Street Address 815 Eddystone Ave	Employer/Occupation/Labor Organization* Information Technology / Ohio Education Association		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43224	Date 05/08/2018	Amount \$27.00
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 05/09/2018	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 05/09/2018	Amount \$4.00
Full Name of Contributor Marya DeBlasi			Registration Number, if PAC	
Street Address 3005 Kenlawn St	Employer/Occupation/Labor Organization* Student Services Specialist / CSCC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43224	Date 05/10/2018	Amount \$10.00
Full Name of Contributor Justin Fitch			Registration Number, if PAC	
Street Address 2932 Oaklawn Street	Employer/Occupation/Labor Organization* Teacher / Dublin City Schools		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43224	Date 05/10/2018	Amount \$25.00
Full Name of Contributor Noelle Lamp			Registration Number, if PAC	
Street Address 2482 Dawnlight Ave	Employer/Occupation/Labor Organization* Provisioning Tech / CenturyLink		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43211	Date 05/10/2018	Amount \$5.00
Full Name of Contributor Julie Mickley			Registration Number, if PAC	
Street Address 2790 Indianola Avenue	Employer/Occupation/Labor Organization* Real estate / Self		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 05/10/2018	Amount \$15.00
Full Name of Contributor Joyce M Martin			Registration Number, if PAC	
Street Address 54 W. 2nd Ave	Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43201	Date 05/11/2018	Amount \$50.00

* 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)]