Door	,
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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Full Name of Contributor	Yes We Can Columbus			CDA C	
Lynn Friedman	110000000000000000000000000000000000000		Registration Number, 11	FPAC	
Street Address	Familiane	O served on Taken O		T (0 1 T) 1 (1)	
-	1	Occupation/Labor Organ	i	Form (Cash, Check, etc.)	
2971 White Bark Place		licable / Not Applicable		Credit	
City	State	Zip Code	Date	Amount	
Columbus Full Name of Contributor	ОН		04/27/2019	\$25.00	
		Registration Number, if	PAC		
Calvin Fisher Street Address	Employer/Occupation/Labor Organization* Form (Ca		From (Carly Check etc.)		
4461 Collier Dr	Nationwide Children's Hospital / Driver		Form (Cash, Check, etc.)		
City	State	Zip Code	Date	Credit Amount	
Columbus	OH	43230	04/28/2019		
Full Name of Contributor	Un	43230	Registration Number, in	\$10.00	
Andrew Meiburg	Registration Number, if PAC				
Street Address	Employer	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
2430 North 4th Street		State University / Stu-		Credit	
City	State	Zip Code	Date	Amount	
Columbus	OH	43202	04/28/2019	\$15.00	
Full Name of Contributor	CII	43202	Registration Number, in		
Danielle Smith					
Street Address Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)		
36 East Beaumont Road	1	OH / Executive Director		Credit	
City	State	Zip Code	Date	Amount	
Columbus	OH	43214	04/28/2019	\$10.00	
Full Name of Contributor	01.	Registration Number, if PAC			
Molly Petrik					
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
5 Glencrest Ave	University of New Hampshire / Adjunct Faculty Credit				
City	State	Zip Code	Date	Amount	
Dover	NH	3820	04/28/2019	\$5.00	
Full Name of Contributor		<u> </u>	Registration Number, if PAC		
Alex D'Amore-Braver					
Street Address	Employer/	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)		Form (Cash, Check, etc.)	
111 West 1st Avenue	Columbus Metropolitan Libra Center Specialist		litan Library / Homework Help Credit		
City	State	Zip Code	Date	Amount	
Columbus	ОН	43201	04/28/2019	\$5.00	
Full Name of Contributor		Registration Number, if PAC			
Katy Shanahan					
Street Address	Employer	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
38 West Weber Road	Equitas Health / Advocacy Manager		Credit		
City	State	Zip Code	Date	Amount	
Columbus	ОН	43202	04/28/2019	\$10.00	
Full Name of Contributor			Registration Number, i	f PAC	
David Butler					
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
67 Buck St.	Not Applicable / Not Applicable Credit				
City	State	Zip Code	Date	Amount	
Canton	NY	1 13617	04/28/2019	\$20.00	

Page Total: \$100.00

^{*} 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)]