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Statement of Contributions Received

Prescribed by Secretary of State 03/05

				·		
Name of Committee in Full						
Yes We Can Columbus			T			
Full Name of Contributor			Registration Number, if PAC			
Kassandra McCleery	Τ			T		
Street Address				Form (Cash, Check, etc.)		
2313 Eastcleft Dr	Community and Partners			Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43221	03/02/2019	\$5.00		
Full Name of Contributor			Registration Number, if PAC			
Eric Britton Street Address	T _E ,	/O /: // // O	<u> </u>	Tr (G + G + · ·)		
	Employer/Occupation/Labor Organization* Nonprofit manager / Public Children Services			Form (Cash, Check, etc.)		
261 Caren Avenue	Associati	t manager / Public Chi ion of Ohio	ildren Services	Credit		
City	State	Zip Code	Date	Amount		
Worthington	ОН	43085	03/02/2019	\$5.00		
Full Name of Contributor			Registration Number,	if PAC		
Jen Gable						
Street Address	1 ' '	Occupation/Labor Organ		Form (Cash, Check, etc.)		
133 S CYPRESS AVE COLUMBUS	Business Manager / Rain Brothe		ers LLC	Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43222	03/02/2019	\$5.00		
Full Name of Contributor			Registration Number, if PAC			
Ed Hoffman						
Street Address	Employer	Occupation/Labor Organ	nization*	Form (Cash, Check, etc.)		
94 E. Tulane Rd.	Booksell	er / Hoffman's Booksh		Credit		
City	State	Zip Code	Date	Amount		
Columbus	OH	43202	03/02/2019	\$5.00		
Full Name of Contributor		Registration Number,	if PAC			
Jubilee Witte						
Street Address	Employer/Occupation/Labor Or			Form (Cash, Check, etc.)		
180 North Chase Ave		icable / Not Applicabl		Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43204	03/02/2019	\$5.00		
Full Name of Contributor			Registration Number,	if PAC		
Danielle Smith	т			T		
	treet Address Employer/Occupation/Labor O			•		
36 East Beaumont Road	+	e Director / NASW OI	T	Credit		
City	State	Zip Code	Date	Amount		
Columbus	ОН	43214	03/02/2019	\$10.00		
Full Name of Contributor			Registration Number,	If PAC		
Gail Burkholder						
Street Address	1 ' '	Occupation/Labor Organ		Form (Cash, Check, etc.)		
45 Governors Place Apt 15	+	pport / Perceptionist II		Credit		
City	State	Zip Code	Date	Amount		
COLUMBUS	ОН	43203	03/02/2019	\$18.00		
Full Name of Contributor Registration Number, if PAC						
Farrell Brody	Emplement	Occupation/Labor Organ	vization*	Form (Cash, Check, etc.)		
Street Address	r · J			Credit		
103 W. California Ave.	+	licable / Not Applicable Zip Code	Date	Amount		
City	State	Zip Code		\$5.00		
Columbus	OH	L	03/03/2019	90.00		

^{*} 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)]