

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Will Richards			Registration Number, if PAC	
Street Address 2420 E Dublin Granville Road #339	Employer/Occupation/Labor Organization* Research Clerk / Cass Information Systems		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43229	Date 12/06/2018	Amount \$25.00
Full Name of Contributor Jessica Patton			Registration Number, if PAC	
Street Address 3070 Sunset Drive	Employer/Occupation/Labor Organization* Circulation Team Lead / Worthington Public Library		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 12/07/2018	Amount \$5.00
Full Name of Contributor Noreen Warnock			Registration Number, if PAC	
Street Address 128 Clinton Heights Ave	Employer/Occupation/Labor Organization* Co-founder & Director of Community Outreach / Local Matters		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 12/07/2018	Amount \$10.00
Full Name of Contributor Vijay Sharma			Registration Number, if PAC	
Street Address 7524 Stone Lake Drive	Employer/Occupation/Labor Organization* Intervention Specialist / Columbus City Schools		Form (Cash, Check, etc.) Credit	
City Dublin	State OH	Zip Code 43016	Date 12/07/2018	Amount \$5.00
Full Name of Contributor Lee Pepper			Registration Number, if PAC	
Street Address 3087 Neil Avenue	Employer/Occupation/Labor Organization* Massage Therapist / Self Employed		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43202	Date 12/07/2018	Amount \$10.00
Full Name of Contributor N/A			Registration Number, if PAC N/A	
Street Address N/A	Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) N/A	
City N/A	State N/A	Zip Code N/A	Date N/A	Amount \$0.00
Full Name of Contributor N/A			Registration Number, if PAC N/A	
Street Address N/A	Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) N/A	
City N/A	State N/A	Zip Code N/A	Date N/A	Amount \$0.00
Full Name of Contributor N/A			Registration Number, if PAC N/A	
Street Address N/A	Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) N/A	
City N/A	State N/A	Zip Code N/A	Date N/A	Amount \$0.00

\* 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)]