31-A
R.C. 3517.10

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## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Yes We Can Columbus							
Full Name of Contributor	Registration Number, if PAC						
Michel Coconis							
Street Address	Employer	r/Occupation/Labor Or	Form (Cash, Check, etc.)				
3920 Orange Blossom Lane	1	ker / Target Stores I		Credit			
City	State	Zip Code	Date	Amount			
Columbus	он	43230	12/30/2017	\$10.00			
Full Name of Contributor			Registration Numb	stration Number, if PAC			
Michael Nau							
Street Address	Employer	r/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)			
728 Euclaire	Research	ner / OSU		Credit			
City	State	Zip Code	Date	Amount			
Columbus	ОН	43209	12/30/2017	\$10.00			
Full Name of Contributor			Registration Numb	Registration Number, if PAC			
Carolyn Carter							
Street Address	Employe	r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)			
5995 Sedgwick Rd.	Retired			Check			
City	State	Zip Code	Date	Amount			
Columbus	OH	43235	12/14/2017	\$20.00			
Full Name of Contributor			Registration Numb	er, if PAC			
Joyce Martin							
Street Address	r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)				
54 W. 2nd Ave	Retired			Cash			
City	State	Zip Code	Date	Amount			
Columbus	OH	43201	12/14/2017	\$20.00			
Full Name of Contributor			Registration Numb	er, if PAC			
N/A			N/A				
Street Address	et Address Employer			Form (Cash, Check, etc.)			
N/A	N/A			N/A			
City	State	Zip Code	Date	Amount			
N/A	N/A	N/A	N/A	\$0.00			
Full Name of Contributor			Registration Number, if PAC				
N/A	<del></del>		N/A				
Street Address		r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)			
N/A	N/A	12:01		N/A			
City	State	Zip Code	Date	Amount			
N/A	N/A	N/A	N/A	\$0.00			
Full Name of Contributor		Registration Number, if PAC N/A					
N/A							
Street Address	1 ' '	r/Occupation/Labor Or	rganization*	Form (Cash, Check, etc.)			
N/A	N/A	Zip Code	T Date	N/A Amount			
City	State	1 "	Date	\$0.00			
N/A	N/A	N/A	N/A Registration Numb				
Full Name of Contributor	N/A	ei, ii fac					
N/A							
Street Address	Address Employer/Occupation/Labor						
N/A	State	Zip Code	Date	N/A Amount			
City	N/A	N/A	N/A	\$0.00			

Page Total: \$60.00

<sup>\*</sup> 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)]