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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 | | | |
| Anna Klatt | | | | | | |
| Street Address | Employer/Occupation/Labor Organizati | | nization* | Form (Cash, Check, etc.) | | |
| 193 East North Broadway | CoverMyMeds / UX Manager | | | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43214 | 05/03/2019 | \$5.00 | | |
| Full Name of Contributor | Regi | | Registration Number, i | Registration Number, if PAC | | |
| Alyssa Chenault | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | nization* | Form (Cash, Check, etc.) | | |
| 4349 Pillar Drive | City of Columbus / Communications Manager | | ations Manager | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Grove City | ОН | 43123 | 05/03/2019 | \$15.00 | | |
| Full Name of Contributor | | | Registration Number, it | [PAC | | |
| Hank Mylander | | | | | | |
| Street Address Employer/Occupation/Labor O | | | nization* | Form (Cash, Check, etc.) | | |
| 832 Thurber Drive West | Franklin County JFS / Policy Analyst | | nalyst | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43215 | 05/03/2019 | \$10.00 | | |
| Full Name of Contributor | <u></u> | | Registration Number, i | f PAC | | |
| Liliana Baiman | | | | | | |
| Street Address Employer/Occupation/Labor O | | | nization* | Form (Cash, Check, etc.) | | |
| 426 Reinhard Ave | Central Ohio worker center / Labor Liason | | | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43206 | 05/03/2019 | \$10.00 | | |
| Full Name of Contributor | | | Registration Number, i | f PAC | | |
| Kevin Truitt | | | | | | |
| Street Address | | | | Form (Cash, Check, etc.) | | |
| 199 W. 3rd Ave. | Disability Rights Ohio / Attorney | | ey | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43201 | 05/04/2019 | \$10.00 | | |
| Full Name of Contributor | <u>. </u> | <u> </u> | Registration Number, i | f PAC | | |
| Amanda Hays | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* Form (Cash, C | | | | | |
| 397 Eldridge Avenue | First Unitarian Universalist Church of Colu | | | Credit | | |
| | Ministerial Intern | | | | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43203 | 05/04/2019 | \$40.00 | | |
| Full Name of Contributor | | | Registration Number, i | f PAC | | |
| Laura Tompkins | | | | | | |
| Street Address Employer/Occupation/Labor C | | Occupation/Labor Orga | nization* | Form (Cash, Check, etc.) | | |
| 8 North Ogden Avenue | Central Ohio Gaming Ventu | | s / Slot Attendant | Credit | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43204 | 05/05/2019 | \$7.50 | | |
| Full Name of Contributor | f PAC | | | | | |
| Will Easton | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| 183 Northmoor Place | Mozilla / Email Strategist | | Credit | | | |
| City | State | Zip Code | Date | Amount | | |
| Columbus | ОН | 43214 | 05/05/2019 | \$27.00 | | |

Page Total: \$124.50

^{*} 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)]