

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Yes We Can Columbus				
Full Name of Contributor Jeff Kennedy			Registration Number, if PAC	
Street Address 684 Kerr St.		Employer/Occupation/Labor Organization* Analyst / Chase		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43215	Date 10/29/2017	Amount \$50.00
Full Name of Contributor Erin Tebben			Registration Number, if PAC	
Street Address 2811 Dresden St. None		Employer/Occupation/Labor Organization* Mental Health therapist / Nationwide Children's Hospital		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43224	Date 10/29/2017	Amount \$25.00
Full Name of Contributor Michel Coconis			Registration Number, if PAC	
Street Address 3920 Orange Blossom Lane		Employer/Occupation/Labor Organization* line worker / Target Stores Inc.		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43230	Date 10/30/2017	Amount \$10.00
Full Name of Contributor Michael Nau			Registration Number, if PAC	
Street Address 728 Euclaire		Employer/Occupation/Labor Organization* Researcher / OSU		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43209	Date 10/30/2017	Amount \$10.00
Full Name of Contributor Kent Fisher			Registration Number, if PAC	
Street Address 126 Amazon Place		Employer/Occupation/Labor Organization* PROFESSOR / COLUMBUS STATE COM COL		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43214	Date 10/30/2017	Amount \$100.00
Full Name of Contributor treva mathis			Registration Number, if PAC	
Street Address 97 Beechwood Rd		Employer/Occupation/Labor Organization* Not employed / Not employed		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43213	Date 10/30/2017	Amount \$3.00
Full Name of Contributor monica watters			Registration Number, if PAC	
Street Address 4691 Belfast Drive		Employer/Occupation/Labor Organization* lmt / healing watters		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43227	Date 10/30/2017	Amount \$10.00
Full Name of Contributor Gregory Jusdanis			Registration Number, if PAC	
Street Address 159 Riverview Park Drive		Employer/Occupation/Labor Organization* Professor / OSU		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43214	Date 10/31/2017	Amount \$25.00

* 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)]