Event Date: 09/02/2017

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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full	, , , , , , , , , , , , , , , , , , ,			. =
Yes We Can Columbus				
Full Name of Contributor		Registration Number, if PAC		
Kimberly Holstlaw				
Street Address	ldress Employer/Occupation/Labor Orga		ization*	Form (Cash, Check, etc.)
1062 S Cassingham Rd	HR Gener	ralist / Shiseido / Bare	1	
City	State	Zip Code	Date	Amount
Columbus	ОН	43209	09/02/2017	\$ 15.00
Full Name of Contributor			Registration Number, if PAC	
Kristin Porter				
Street Address				Form (Cash, Check, etc.)
773 Alexandria Colony Ct.	Paralegal / Bricker & Eckler LLP		L P	Cash
City	State	Zip Code	Date	Amount
Columbus	он	43215	09/02/2017	\$15.00
Full Name of Contributor	Registration h			PAC
Lewis Gray				
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)
P.O Box 164027	Semi driver / Self			Cash
City	State	Zip Code	Date	Amount
Columbus	ОН	43216	09/02/2017	\$30.00
Columbia			Registration Number, it	FPAC
Miriam Utter				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
194 Sinsbury Dr. N	Retired /			Credit
City	State	Zip Code	Date	Amount
Worthington	ОН	43085	09/02/2017	\$30.00
Il Name of Contributor		Registration Number, if PAC		
Stephanie Ash				
Street Address	Employer/Occupation/Labor Organization		ization*	Form (Cash, Check, etc.)
3840 Glenwood Rd	Attorney / Books@Work			Credit
City	State	Zip Code	Date	Amount
Cleveland Heights	ОН	44121	09/02/2017	\$15.00
Full Name of Contributor	0.1		Registration Number, i	f PAC
Terry O'Sullivan				
Street Address Employer/Occupation/Labor Organiz			ization*	Form (Cash, Check, etc.)
59 Casterton Ave	Education / Univ. Akron			Credit
City	State	Zip Code	Date	Amount
Akron	ОН	44303	09/02/2017	\$15.00
Full Name of Contributor			Registration Number, i	
Wendy Patton				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
290 Olentangy St	Researcher / Policy Matters Ohio			Cash
City	State	Zip Code	Date	Amount
Columbus	OH	43202	09/02/2017	\$8.00

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state Contributions from No. 31-E and list the date of the event in the date column

^{*} 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)]
Fill in the boxes below only on the last page for this event.