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		
Aaron Brown					
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
69 Glenmont Ave	Owner / Tabletop Game Café			Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43214	09/02/2017	\$20.00	
Full Name of Contributor			Registration Number, i	4	
Adrienne Beck					
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)	
7105 W. Town Market Lane	Marketing / Abbott			Credit	
City	State	Zip Code	Date	Amount	
New Albany	он	43065	09/02/2017	\$15.00	
Full Name of Contributor			Registration Number, i		
Andrea Sapp					
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
5501 Kenneylane Blvd	Receptionist			Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43235	09/02/2017	\$20.00	
		Registration Number, i			
Andrew Porter					
Street Address Employer/Occupation/Labor Organ					
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)	
		Occupation/Labor Organ ganizer / NNU	ization*	Form (Cash, Check, etc.) Credit	
Street Address 773 Alexandria Colony Ct. City			Date		
773 Alexandria Colony Ct.	Union Or	ganizer / NNU		Credit	
773 Alexandria Colony Ct. City	Union Or State	ganizer / NNU Zip Code	Date	Credit Amount \$15.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor	Union Or State	ganizer / NNU Zip Code	Date 09/02/2017	Credit Amount \$15.00	
773 Alexandria Colony Ct. City Columbus	Union Or State OH	ganizer / NNU Zip Code 43215	Date 09/02/2017 Registration Number, i	Credit Amount \$15.00 f PAC	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth	Union Or State OH	ganizer / NNU Zip Code 43215 Occupation/Labor Organ	Date 09/02/2017 Registration Number, i	Credit Amount \$15.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address	Union Or State OH	ganizer / NNU Zip Code 43215 Occupation/Labor Organ	Date 09/02/2017 Registration Number, i	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.)	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St.	Union Or State OH Employer/L	ganizer / NNU Zip Code 43215 Occupation/Labor Organizelf	Date 09/02/2017 Registration Number, i	Credit Amount \$15.00 fPAC Form (Cash, Check, etc.) Cash	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City	Union Or State OH Employer/ LMT / So State	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code	Date 09/02/2017 Registration Number, is ization*	Credit Amount \$15.00 f PAC Form (Cash, Check, etc.) Cash Amount \$10.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus	Union Or State OH Employer/ LMT / So State	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017	Credit Amount \$15.00 f PAC Form (Cash, Check, etc.) Cash Amount \$10.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor	Union Or State OH Employer/ LMT / So State OH	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code	Date 09/02/2017 Registration Number, in ization* Date 09/02/2017 Registration Number, in	Credit Amount \$15.00 f PAC Form (Cash, Check, etc.) Cash Amount \$10.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address	Union Or State OH Employer/ LMT / So State OH	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code 43215 Occupation/Labor Organ	Date 09/02/2017 Registration Number, in ization* Date 09/02/2017 Registration Number, in	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.)	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer	Union Or State OH Employer/CLMT / Sc State OH Employer/C	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code 43215 Occupation/Labor Organ	Date 09/02/2017 Registration Number, in ization* Date 09/02/2017 Registration Number, in	Credit Amount \$15.00 fPAC Form (Cash, Check, etc.) Cash Amount \$10.00 fPAC	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address 824 Sullivant Ave	Union Or State OH Employer/ LMT / So State OH Employer/ Student / State	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code 43215 Occupation/Labor Organ OSU	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization*	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.) Credit Amount	
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773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address 824 Sullivant Ave City Columbus Full Name of Contributor	Union Or State OH Employer/ LMT / So State OH Employer/ Student / State	ganizer / NNU Zip Code 43215 Occupation/Labor Organizelf Zip Code 43215 Occupation/Labor Organicol Cocupation/Labor Organicol C	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization* Date 09/02/2017	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.) Credit Amount \$10.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address 824 Sullivant Ave City Columbus	Employer/CLMT / Scate OH Employer/CLMT / Scate OH Employer/CStudent / State OH	ganizer / NNU Zip Code 43215 Occupation/Labor Organizelf Zip Code 43215 Occupation/Labor Organicol Cocupation/Labor Organicol C	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.) Credit Amount \$10.00	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address 824 Sullivant Ave City Columbus Full Name of Contributor Elizabeth Blackburn	Employer/C LMT / So State OH Employer/C Student / State OH Employer/C	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code 43215 Occupation/Labor Organ OSU Zip Code 43223	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization*	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.) Credit Amount \$10.00 FPAC	
773 Alexandria Colony Ct. City Columbus Full Name of Contributor Brandy Barth Street Address 809 Hamlet St. City Columbus Full Name of Contributor Celia Oberholzer Street Address 824 Sullivant Ave City Columbus Full Name of Contributor Elizabeth Blackburn Street Address	Employer/C LMT / So State OH Employer/C Student / State OH Employer/C	ganizer / NNU Zip Code 43215 Occupation/Labor Organ elf Zip Code 43215 Occupation/Labor Organ OSU Zip Code 43223	Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization* Date 09/02/2017 Registration Number, is ization*	Credit Amount \$15.00 FPAC Form (Cash, Check, etc.) Cash Amount \$10.00 FPAC Form (Cash, Check, etc.) Credit Amount \$10.00 FPAC Form (Cash, Check, etc.)	

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state Contributions from form 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.