

# 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 Agnes Vishnevkin			Registration Number, if PAC	
Street Address 450 Wetmore Rd	Employer/Occupation/Labor Organization* N/A / N/A		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43214	Date 10/18/2017	Amount \$30.00
Full Name of Contributor Anna Siriano			Registration Number, if PAC	
Street Address 2335 Glenview Blvd.	Employer/Occupation/Labor Organization* Communications Coordinator / The OEC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43204	Date 10/18/2017	Amount \$15.00
Full Name of Contributor Benjamin Kile			Registration Number, if PAC	
Street Address 874 Dennison Ave	Employer/Occupation/Labor Organization* Data Analyst / ICC		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43215	Date 10/18/2017	Amount \$27.00
Full Name of Contributor Christie McAlpine			Registration Number, if PAC	
Street Address 20 E Russell St	Employer/Occupation/Labor Organization* Probation Supervisor / Franklin County		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43215	Date 10/18/2017	Amount \$20.00
Full Name of Contributor Elizabeth Gill			Registration Number, if PAC	
Street Address 1222 Franklin Ave	Employer/Occupation/Labor Organization* Paralegal / Nationwide		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43205	Date 10/18/2017	Amount \$20.00
Full Name of Contributor Gregory Kilcup			Registration Number, if PAC	
Street Address 53 E Torrence Rd	Employer/Occupation/Labor Organization* Professor / Ohio State Univ		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43214	Date 10/18/2017	Amount \$40.00
Full Name of Contributor Gregory Pachet			Registration Number, if PAC	
Street Address 2984 Indianola Ave	Employer/Occupation/Labor Organization* System Technician / Esterline		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43202	Date 10/18/2017	Amount \$20.00

\* 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)]

Fill in the boxes below only on the last page for this event.

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