31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 03/08

Name of Committee in Full: Yes We Can Columbus

Full Name of Contributor			Registration Number, if PAC	
Working Families Party National PAC			C00606962	
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
1 METROTECH CENTER NORTH SUITE 11				Transfer
City	**State**	**Zip Code**	**Date**	**Amount**
Brooklyn	NY	11201	04/18/2017	$7,000.00
Full Name of Contributor			**Registration Number, if PAC**	
Mark Shanahan				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
3192 Morningside Drive	New Morning Energy LLC			Check
City	**State**	**Zip Code**	**Date**	**Amount**
Columbus	OH	43292	04/25/2017	$800.00
Full Name of Contributor			**Registration Number, if PAC**	
Ayres for Columbus				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
2101 Brookhurst Ave.				Check
City	**State**	**Zip Code**	**Date**	**Amount**
Columbus	OH	43229	04/26/2017	$2,800.00
Full Name of Contributor			**Registration Number, if PAC**	
Friends of Michael J. Skindell				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
16800 Delaware Ave				Check
City	**State**	**Zip Code**	**Date**	**Amount**
Lakewood	OH	44107	04/26/2017	$100.00
Full Name of Contributor			**Registration Number, if PAC**	
Isaiah St. John				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
90 E 8th Ave Apt 3	Spaghetti Warehouse			Credit
City	**State**	**Zip Code**	**Date**	**Amount**
Columbus	OH	43201	04/26/2017	$10.00
Full Name of Contributor			**Registration Number, if PAC**	
N/A			N/A	
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
N/A	N/A			N/A
City	**State**	**Zip Code**	**Date**	**Amount**
N/A	N/A	N/A	N/A	$0.00
Full Name of Contributor			**Registration Number, if PAC**	
N/A			N/A	
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
N/A	N/A			N/A
City	**State**	**Zip Code**	**Date**	**Amount**
N/A	N/A	N/A	N/A	$0.00
Full Name of Contributor			**Registration Number, if PAC**	
N/A			N/A	
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
N/A	N/A			N/A
City	**State**	**Zip Code**	**Date**	**Amount**
N/A	N/A	N/A	N/A	$0.00

* 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)]

Page Total: $10,710.00