Event Date: 10/12/2017

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

Prescribed by Secretary of State 03/05

Yes We Can Columbus				
Full Name of Contributor			Registration Number, if PAC	
Jon Green				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
949 Summit Street	Student / Ohio State		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	10/12/2017	\$25.00
Full Name of Contributor Registration 1			Registration Number	, if PAC
Kayla Merchant				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
459 E Sycamore St	Compliance & ethics / DHL		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43206	10/12/2017	\$100.00
Il Name of Contributor Registration Number			, if PAC	
Martin Kellogg				
Street Address	Employer/	Occupation/Labor Orga	nization*	Form (Cash, Check, etc.)
2582 Summit St	SW Developer / Nationwide		Cash	
City	State	Zip Code	Date	Amount
Columbus	ОН	43202	10/12/2017	\$5.00
Full Name of Contributor Registration Nu			Registration Number	, if PAC
Mary Couter			<u></u>	·
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
1070 Oberlin Dr	Retired /			Cash
City	State	Zip Code	Date	Amount
Columbus	ОН	43271	10/12/2017	\$20.00
Full Name of Contributor Registration Nu				
Full Name of Contributor			Registration Number	, if PAC
Full Name of Contributor Michelle R Hill			Registration Number	; if PAC
	Employer	Occupation/Labor Orga		Form (Cash, Check, etc.)
Michelle R Hill	1	Occupation/Labor Orga St. James Tavern		
Michelle R Hill Street Address	1	-		Form (Cash, Check, etc.)
Michelle R Hill Street Address 258 Clinton St.	Owner /	St. James Tavern	nization*	Form (Cash, Check, etc.) Check
Michelle R Hill Street Address 258 Clinton St. City	Owner / State	St. James Tavern Zip Code	nization*	Form (Cash, Check, etc.) Check Amount \$300.00
Michelle R Hill Street Address 258 Clinton St. City Columbus	Owner / State	St. James Tavern Zip Code	Date 10/15/2017	Form (Cash, Check, etc.) Check Amount \$300.00
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor	Owner / State OH	St. James Tavern Zip Code	Date 10/15/2017 Registration Number	Form (Cash, Check, etc.) Check Amount \$300.00
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius	Owner / State OH Employer	St. James Tavern Zip Code 43202	Date 10/15/2017 Registration Number	Form (Cash, Check, etc.) Check Amount \$300.00
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address	Owner / State OH Employer	St. James Tavern Zip Code 43202 Occupation/Labor Orga	Date 10/15/2017 Registration Number	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.)
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave	Owner / State OH Employer Substitut	St. James Tavern Zip Code 43202 Occupation/Labor Orga te Teacher / Columbus	Date 10/15/2017 Registration Number mization* s Public Schools	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave City	Owner / State OH Employer Substitut State	St. James Tavern Zip Code 43202 Occupation/Labor Orga e Teacher / Columbus Zip Code	Date 10/15/2017 Registration Number mization* s Public Schools Date	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash Amount \$20.00
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave City Columbus	Owner / State OH Employer Substitut State	St. James Tavern Zip Code 43202 Occupation/Labor Orga e Teacher / Columbus Zip Code	Date 10/15/2017 Registration Number mization* s Public Schools Date 10/12/2017	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash Amount \$20.00 r, if PAC
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave City Columbus Full Name of Contributor	Owner / State OH Employer Substitut State OH	St. James Tavern Zip Code 43202 Occupation/Labor Orga e Teacher / Columbus Zip Code	Date 10/15/2017 Registration Number mization* s Public Schools Date 10/12/2017 Registration Number N/A	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash Amount \$20.00
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave City Columbus Full Name of Contributor	Owner / State OH Employer Substitut State OH	St. James Tavern Zip Code 43202 Coccupation/Labor Orga e Teacher / Columbus Zip Code 43202	Date 10/15/2017 Registration Number mization* s Public Schools Date 10/12/2017 Registration Number N/A	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash Amount \$20.00 r, if PAC
Michelle R Hill Street Address 258 Clinton St. City Columbus Full Name of Contributor Sandy Bolzenius Street Address 88 W Blake Ave City Columbus Full Name of Contributor N/A Street Address	Owner / State OH Employer Substitut State OH Employer	St. James Tavern Zip Code 43202 Coccupation/Labor Orga e Teacher / Columbus Zip Code 43202	Date 10/15/2017 Registration Number mization* s Public Schools Date 10/12/2017 Registration Number N/A	Form (Cash, Check, etc.) Check Amount \$300.00 r, if PAC Form (Cash, Check, etc.) Cash Amount \$20.00 r, if PAC 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.