

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 Adam Parsons			Registration Number, if PAC	
Street Address 691 Frebis Ave	Employer/Occupation/Labor Organization* Systems Specialist / Ohio State University		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43206	Date 09/26/2017	Amount \$40.00
Full Name of Contributor Bob Fittrakis			Registration Number, if PAC	
Street Address 1021 E Broad St	Employer/Occupation/Labor Organization* Professor / Columbus State		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43205	Date 09/26/2017	Amount \$200.00
Full Name of Contributor Donna Keener			Registration Number, if PAC	
Street Address 548 E Mithoff St	Employer/Occupation/Labor Organization* Business Development / Engineering Innovation		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43206	Date 09/26/2017	Amount \$20.00
Full Name of Contributor Erika Russ			Registration Number, if PAC	
Street Address 243 Quitman St	Employer/Occupation/Labor Organization* Admin / MVTs		Form (Cash, Check, etc.) Cash	
City Dayton	State OH	Zip Code 45410	Date 09/26/2017	Amount \$20.00
Full Name of Contributor Kevin Truitt			Registration Number, if PAC	
Street Address 199 W. 3rd Ave.	Employer/Occupation/Labor Organization* Attorney / Disability Rights Ohio		Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43201	Date 09/26/2017	Amount \$20.00
Full Name of Contributor Kurtise Bateman			Registration Number, if PAC	
Street Address 498 Enfield Rd.	Employer/Occupation/Labor Organization* Retired / Retired		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	Date 09/26/2017	Amount \$50.00
Full Name of Contributor Mark Rylance			Registration Number, if PAC	
Street Address 1797 Hess Blvd	Employer/Occupation/Labor Organization* Paralegal / Ohio Attorney General		Form (Cash, Check, etc.) Credit	
City Columbus	State OH	Zip Code 43212	Date 09/26/2017	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