Event Date:	10/18/2017
	Daga 3

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	
Robert Fitrakis				
Street Address	Employer/Occupation/Labor Or			Form (Cash, Check, etc.)
1021 E Broad	Professor / CSCC			Cash
City	State	Zip Code	Date	Amount
Columbus	ОН	43205	10/18/2017	\$40.00
			Registration Numb	er, if PAC
Suzanne Patzer				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1021 E. Broad St	Education Administrator / CSCC			Cash
City	State	Zip Code	Date	Amount
Columbus	ОН	43205	10/18/2017	\$10.00
Full Name of Contributor			Registration Numb	er, if PAC
Tom Bennett	_			
Street Address	Employe	r/Occupation/Labor (Organization*	Form (Cash, Check, etc.)
956 Strimple Ave	Owner / Orbit City Bikes			Cash
City	State	Zip Code	Date	Amount
Columbus	OH	43229	10/18/2017	\$40.00
Full Name of Contributor		Registration Numb	Registration Number, if PAC	
N/A		N/A		
6	Employer/Occupation/Labor Organization*		`*	E (O 1 O) 1 · · ·
Street Address	Employe	r/Occupation/Labor (organization"	Form (Cash, Check, etc.)
N/A N/A	N/A	r/Occupation/Labor (organization	N/A
	1 ' '	Zip Code	Date	
N/A	N/A			N/A
N/A City	N/A State	Zip Code	Date	N/A Amount \$0.00
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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

Total contributions this event	Total expenditures this event	
\$396.00	\$0.00	Page Total: \$90.00

^{*} 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.