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

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.