Event	Date:	09/02/201	7
		Page 1	

## 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			Designation Number	- :CDAC	
			Registration Number	er, II PAC	
Aaron Brown Street Address	Formula	/O	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	F (0.1.0)	
	Employer/Occupation/Labor Organi		· ·	, , , , , , , , , , , , , , , , , , , ,	
69 Glenmont Ave	_	/ Tabletop Game C		Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43214	09/02/2017	\$20.00	
Full Name of Contributor			Registration Number	er, if PAC	
Adrienne Beck	1				
Street Address	Employer/Occupation/Labor Organiza		rganization*	Form (Cash, Check, etc.)	
7105 W. Town Market Lane	Marketing / Abbott		T _	Credit	
City	State	Zip Code	Date	Amount	
New Albany	ОН	43065	09/02/2017	\$15.00	
Full Name of Contributor			Registration Number	Registration Number, if PAC	
Andrea Sapp	_				
Street Address	Employer/Occupation/Labor Organization*		rganization*	Form (Cash, Check, etc.)	
5501 Kenneylane Blvd	Receptionist		<del></del>	Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43235	09/02/2017	\$20.00	
Full Name of Contributor			Registration Number	er, if PAC	
Andrew Porter					
Street Address	Employer/Occupation/Labor Orga		rganization*	Form (Cash, Check, etc.)	
773 Alexandria Colony Ct.	Union Organizer / NNU			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43215	09/02/2017	\$15.00	
Full Name of Contributor			Registration Number	er, if PAC	
Brandy Barth					
Street Address	Employe	er/Occupation/Labor C	Organization*	Form (Cash, Check, etc.)	
809 Hamlet St.	LMT / Self			Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43215	09/02/2017	\$10.00	
Full Name of Contributor			Registration Number	er, if PAC	
Celia Oberholzer					
Street Address	Employer/Occupation/Labor Organization*		rganization*	Form (Cash, Check, etc.)	
824 Sullivant Ave	Student / OSU			Credit	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43223	09/02/2017	\$10.00	
Full Name of Contributor			Registration Number	er, if PAC	
Elizabeth Blackburn					
Street Address	Employer/Occupation/Labor (		Organization*	Form (Cash, Check, etc.)	
521 Glenmont Ave.	Software Developer / The Wendy's Co			Cash	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43214	09/02/2017	\$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

Total contributions this event	Total expenditures this event				
		Page Total: \$110.00			

<sup>\*</sup> 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.