Event Date: 07/20/2019

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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	
Jeremy Baiman				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
426 Reinhard Ave	Labor Relations Consultant / Ohio Education Association		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43206	07/20/2019	\$30.00
Full Name of Contributor			Registration Number,	
celia oberholzer				
Street Address	Employer	/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)
824 sullivant ave	food service / jeni's splendid ice creams		Credit	
City	State	Zip Code	Date	Amount
columbus	ОН	43223	07/20/2019	\$20.00
Full Name of Contributor			Registration Number,	
Dan Pinto	Registration Number, if the			
Street Address	Employe	/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)
245 w 4th avenue apt 3	Retail / Lions den		Credit	
City	State	Zip Code	Date	Amount
Columbus	ОН	43201	07/21/2019	\$20.00
Full Name of Contributor	Registration Number,			
Sarah Huffman			1	
Street Address	Employe	r/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)
Street Address 1655 N 4th St	Child N	r/Occupation/Labor Or utrition Program Coc	ganization* ordinator / Westerville	Form (Cash, Check, etc.) Credit
1655 N 4th St	Child No Area Re	utrition Program Coo source Ministry	ordinator / Westerville	Credit
1655 N 4th St City	Child No Area Re State	utrition Program Coo source Ministry Zip Code	Ordinator / Westerville Date	Credit Amount
1655 N 4th St City Columbus	Child No Area Re	utrition Program Coo source Ministry	Date 07/21/2019	Credit Amount \$20.00
City Columbus Full Name of Contributor	Child No Area Re State	utrition Program Coo source Ministry Zip Code	Ordinator / Westerville Date	Credit Amount \$20.00
City Columbus Full Name of Contributor Alyssa Williams	Child No Area Re State OH	utrition Program Coo source Ministry Zip Code 43201	Date 07/21/2019 Registration Number,	Credit Amount \$20.00 if PAC
City Columbus Full Name of Contributor Alyssa Williams Street Address	Child No Area Re State OH	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or	Date 07/21/2019 Registration Number,	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.)
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave	Child No Area Re State OH Employe Sr. Anal	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins	Date 07/21/2019 Registration Number, ganization*	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City	Child No Area Re State OH Employe Sr. Anal State	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code	Date 07/21/2019 Registration Number, squarization* Date Date	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus	Child No Area Re State OH Employe Sr. Anal	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins	Date 07/21/2019 Registration Number, squarization* surance Date 07/21/2019	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor	Child No Area Re State OH Employe Sr. Anal State	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code	Date 07/21/2019 Registration Number, squarization* Date Date	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant	Child No Area Re State OH Employe Sr. Anal State OH	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201	Date 07/21/2019 Registration Number, ganization* surance Date 07/21/2019 Registration Number, paramete Date 07/21/2019 Registration Number, paramete Date 07/21/2019	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address	Child No Area Re State OH Employe Sr. Anal State OH	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or	Date 07/21/2019 Registration Number, ganization* surance Date 07/21/2019 Registration Number, paramete Date 07/21/2019 Registration Number, paramete Date 07/21/2019	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.)
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St	Child No Area Restate OH Employe Sr. Anal State OH Employe Complia	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or ance / Williams Lea	Date 07/21/2019 Registration Number, ganization* surance Date 07/21/2019 Registration Number,	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia State	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or once / Williams Lea Zip Code	Date 07/21/2019 Registration Number, ganization* surance Date 07/21/2019 Registration Number, ganization* The property of the	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount Amount Credit Amount
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City Columbus	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or ance / Williams Lea	Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization*	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$50.00
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City Columbus Full Name of Contributor	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia State	utrition Program Coosource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or once / Williams Lea Zip Code	Date 07/21/2019 Registration Number, ganization* surance Date 07/21/2019 Registration Number, ganization* The property of the	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$50.00
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City Columbus Full Name of Contributor Street Address Tog E Kossuth St City Columbus Full Name of Contributor Dan Pinto	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia State OH	attrition Program Coosource Ministry Zip Code 43201 T/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 T/Occupation/Labor Or once / Williams Lea Zip Code 43206	Date 07/21/2019 Registration Number, surance Date 07/21/2019 Registration Number, surance Date 07/21/2019 Registration Number, significant surance 07/21/2019 Registration Number, significant surance 07/21/2019 Registration Number, significant surance 07/21/2019	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$50.00
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City Columbus Full Name of Contributor Street Address 709 E Kossuth St City Columbus Full Name of Contributor Dan Pinto Street Address	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia State OH	utrition Program Cocsource Ministry Zip Code 43201 r/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 r/Occupation/Labor Or once / Williams Lea Zip Code 43206 r/Occupation/Labor Or once / Williams Lea	Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization*	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$50.00 if PAC Form (Cash, Check, etc.)
City Columbus Full Name of Contributor Alyssa Williams Street Address 141 W 1st Ave City Columbus Full Name of Contributor Kayla Merchant Street Address 709 E Kossuth St City Columbus Full Name of Contributor Street Address Tog E Kossuth St City Columbus Full Name of Contributor Dan Pinto	Child No Area Re State OH Employe Sr. Anal State OH Employe Complia State OH	attrition Program Coosource Ministry Zip Code 43201 T/Occupation/Labor Or yst / Nationwide Ins Zip Code 43201 T/Occupation/Labor Or once / Williams Lea Zip Code 43206	Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization* Date 07/21/2019 Registration Number, ganization*	Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$20.00 if PAC Form (Cash, Check, etc.) Credit Amount \$50.00 if PAC

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.