

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 Jessica Beardsley			Registration Number, if PAC	
Street Address 418 Fairwood Ave		Employer/Occupation/Labor Organization* Librarian / Columbus Metropolitan Library		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43205	Date 08/24/2017	Amount \$27.00
Full Name of Contributor Joe Sommer			Registration Number, if PAC	
Street Address 5672 Great Hall Ct		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43231	Date 08/24/2017	Amount \$500.00
Full Name of Contributor Kevin Truitt			Registration Number, if PAC	
Street Address 199 W. Third Ave.		Employer/Occupation/Labor Organization* Attorney / DRO		Form (Cash, Check, etc.) Credit
City Columbus	State OH	Zip Code 43201	Date 08/24/2017	Amount \$27.00
Full Name of Contributor Laura Bloch			Registration Number, if PAC	
Street Address 90 S. Merkle Rd.		Employer/Occupation/Labor Organization* Consultant / Improving Enterprises		Form (Cash, Check, etc.) Credit
City Bexley	State OH	Zip Code 43209	Date 08/24/2017	Amount \$27.00
Full Name of Contributor Leo Simpson			Registration Number, if PAC	
Street Address 910 Apt B Boscastle Court		Employer/Occupation/Labor Organization* Not Employed / Not Employed		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43214	Date 08/24/2017	Amount \$10.00
Full Name of Contributor Lesla Veigel			Registration Number, if PAC	
Street Address 9030 Ridgeline Dr		Employer/Occupation/Labor Organization* Customer Service / Farmers Insurance		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43068	Date 08/24/2017	Amount \$12.00
Full Name of Contributor Mark Condo			Registration Number, if PAC	
Street Address 124 Tibet Rd.		Employer/Occupation/Labor Organization* Retail / R.E.I.		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43202	Date 08/24/2017	Amount \$10.00

* 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

Total contributions this event

Total expenditures this event

Page Total: \$613.00