

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

| | | | | | | |
|--|--------------------|--|--------------|---|----|----------|
| Name of Committee in Full Friends of Schregardus | | | | | | |
| To Whom Paid Staples | | | M | D | Y | Amount |
| | | | 0 | 4 | 18 | \$17.50 |
| Address 3939 Trueman Blvd. | | Purpose supplies for fundraiser | | | | |
| City Hilliard | State OH | Zip Code 43026 | Check Number | | | |
| To Whom Paid Kroger | | | M | D | Y | Amount |
| | | | 0 | 4 | 19 | \$16.13 |
| Address 150 W. Sycamore St. | | Purpose balloons for fundraiser | | | | |
| City Columbus | State OH | Zip Code 43215 | Check Number | | | |
| To Whom Paid The Walrus | | | M | D | Y | Amount |
| | | | 0 | 4 | 19 | \$442.97 |
| Address 143 E. Main Street | | Purpose food and drinks for fundraiser | | | | |
| City Columbus | State OH | Zip Code 43215 | Check Number | | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | | | Purpose | | | |
| City | State | Zip Code | Check Number | | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | | | Purpose | | | |
| City | State | Zip Code | Check Number | | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | | | Purpose | | | |
| City | State | Zip Code | Check Number | | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | | | Purpose | | | |
| City | State | Zip Code | Check Number | | | |

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

| |
|-----------------|
| \$476.60 |
| Page Total \$ |