



**Statement of Expenditures for Social or Fund-Raising Event**

Form 31-F  
R.C. 3517.10

<b>Full Name of Committee</b>				
Kevin J Cavener for Trustee				
<b>To Whom Paid</b>			<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
Kevin J Cavener			10/12/17	118.38
<b>Street Address</b>		<b>Purpose</b>		
3657 olde Ridenour Rd		Fund Raiser		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
Gahanna	OH <input checked="" type="radio"/>	43730	019A	
<b>To Whom Paid</b>			<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
	OH <input checked="" type="radio"/>			
<b>To Whom Paid</b>			<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
	OH <input checked="" type="radio"/>			
<b>To Whom Paid</b>			<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
	OH <input checked="" type="radio"/>			
<b>To Whom Paid</b>			<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
	OH <input checked="" type="radio"/>			

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.

Page Total \$ 118.38