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

Form 31-F R.C. 3517.10

Full Name of Committee				
Citizens for Mingo				
To Whom Paid			Date (MM/DD/YYYY)	Amount
Athletic Club of Columbus			06/13/2018	1,560.90
Street Address	Purpose			
136 E Broad St	Food 8	Beverage; 6	/13 Event	
City	State	Zip Code	Check Number	
Columbus	ОН	43215	DC	
To Whom Paid		· • · · · · · · · · · · · · · · · · · ·	Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose	:		
City	State	Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			<u> </u>
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.

Page Total \$	1,560.90		
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