3	1.	-F		
R.	Ċ.	351	7,10	

Event Date	9/21/11	
Page 1		

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

ne of Committee in Full THE ELECT STEVEN M. BENNETT (COMMITTEE			Amount		
Whom Paid PLANKS ON BROADWAY			0 9 2 1 1 1	\$222.00		
dress	Purpose FUNDRAISER FOOD, BEVERAGES, AND GRATUITY					
4022 BROADWAY	State	Zip Code	Check Number			
GROVE CITY	OH	43123	CASH M D Y	Amount		
Whom Paid						
ldress	Purpose					
		1	Check Number			
ny	State OH	Zip Code	Chest rame			
		<u></u>	M D Y	Amount		
o Whom Paid		· •		<u> </u>		
ddress	Purpose					
	State	Zip Code	Check Number			
Sity	OH					
o Whom Paid			M D Y	Amount		
				<u> </u>		
Address	Purpose					
	State	Zip Code	Check Number			
City	OH _			Amount		
To Whom Paid			M D Y	Amount		
	Purpose					
Address						
City	State	Zip Code	Check Number			
	OH		M D Y	Amount		
To Whom Paid						
Address	Purpose	1				
		2:- Cod:	Check Number			
City	State OH	Zip Code				
To Whom Paid	1011_		M D Y	Amount		
10 wholit raid						
Address	Purpose					
	State	Zip Code	Check Number			
City	OH		1			

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.

\$222.00
Page Total \$ _____