3	1-	F		
R	.C.	351	7.	10

Event Date	06/13/06
Page	25

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full								
THE COMMITTEE TO ELECT DORRI	S FOR	R IIID	GE					
To Whom Paid	0101	()00	GE	М	D	Y	Amount	
SPICE BAR & LOUNGE					1 3			600.00
Address	Purpose			1010	/ 1 0	7 0	<u> </u>	
491 PARK ST	_		ENTAL					
City	S	Zip Code	Check Number					
COLUMBUS	O H 43215			1014				
To Whom Paid			10210	М	D	Ý.	Amount	
Address	Purpose							
City	s	tate	Zip Code	Check	Number			
		Ι						
To Whom Paid			1 "	М	D	Y	Amount	
						Ш		
Address	Purpose	:		1	_11		<u> </u>	
City	S	tate	Zip Code	Check	Number			
To Whom Paid	_			М	D	Y	Amount	
				1				
Address	Purpose							
	i							
City	S	tate	Zip Code	Check	Number			
		1						
To Whom Paid	-		ſ	М	D	Y	Amount	
Address	Purpose							
City	State Zip Code		Zip Code	Check Number				
To Whom Paid	<u> </u>	,	·	M	D	Y	Amount	
Address	Purpose				<u> </u>			
City	State Zip Code		Check Number					
•								
To Whom Paid			ı	M	D	Y	Amount	
Address	Purpose						1	-
City	S	tate	Zip Code	Check 1	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 \$	600.00
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