

Event Date 4/2/2009

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# Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Citizens for Brett Sciotto</b>									
To Whom Paid <b>Capital Club</b>						M <b>0</b>	D <b>7</b>	Y <b>2</b>	Amount <b>116.49</b>
Address <b>41 S High Street</b>		Purpose <b>food for fundraising event at Capital Club</b>							
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>	Check Number <b>9564398</b>				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State	H	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 \$ 116.49