

Date	II A	Page 7

Statement of Expenditures for Social or Fund-Raising Event

Form 31-F R.C. 3517.10

Full Name of Committee Carpenters Local Union To Whom Paid Street Address Pur City State	pose	300 PC	Date (MM/DD/YYYY)	Amount
Street Address Pur			Date (MM/DD/YYYY)	Amount
			<u></u>	
City Stat	te			<u>I</u>
		Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address Pur	pose			
City	te	Zip Code	Check Number	
To Whom Paid	<u></u>		Date (MM/DD/YYYY)	Amount
Street Address Purp	pose			
City	te	Zip Code	Check Number	
To Whom Paid	_		Date (MM/DD/YYYY)	Amount
Street Address Purp	pose	- 1:		
City	te	Zip Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address Purp	pose			
City	te	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 \$_	0.00	