

Event Date 3-19-09

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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>Heritage Golf Club</b>						M	D	Y	Amount			
						0	3	1	9	0	9	67.80
Address <b>3525 Heritage Club Drive</b>				Purpose <b>Sciotto portion of food expense - split with 3 candidates</b>								
City <b>Hilliard</b>				State <b>O H</b>		Zip Code <b>43026</b>		Check Number <b>8957773</b>				
To Whom Paid <b>American Strategies, LLC</b>						M	D	Y	Amount			
						0	4	1	5	0	9	113.22
Address <b>41 S. High Street, Suite 1275</b>				Purpose <b>printing and postage for invitations</b>								
City <b>Columbus</b>				State <b>O H</b>		Zip Code <b>43215</b>		Check Number <b>8650878</b>				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
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 \$ 181.02