

| | |
|------------|-----------------|
| Event Date | <u>07/31/07</u> |
| Page | <u>1</u> |

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

| | | | | | | | | | | | | |
|---|--|--|--|------------------------------|--|--------------------------|---|-----------------------------|--------|---|---|--------|
| Name of Committee in Full Friends for Ginther | | | | | | | | | | | | |
| To Whom Paid Short North Tavern | | | | | | M | D | Y | Amount | | | |
| | | | | | | 0 | 7 | 3 | 1 | 0 | 7 | 261.50 |
| Address 674 North High St. | | | | Purpose Fundraiser | | | | | | | | |
| City Columbus | | | | State O H | | Zip Code 43215 | | Check Number 1482 | | | | |
| 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 | | | | |
| | | | | | | | | | | | | |
| 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 \$ | <u>261.50</u> |
|---------------|---------------|