

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Citizens For Kim Maggard</u>													
To Whom Paid <u>USPS</u>							M	D	Y	Amount			
							<u>0</u>	<u>8</u>	<u>2</u>	<u>3</u>	<u>1</u>	<u>3</u>	<u>64.40</u>
Address <u>14</u>				Purpose <u>Stamps</u>									
City <u>Whitehall</u>				State <u>Oh</u>		Zip Code <u>43213</u>		Check Number <u>1087</u>					
To Whom Paid <u>GFS</u>							M	D	Y	Amount			
							<u>0</u>	<u>9</u>	<u>0</u>	<u>4</u>	<u>1</u>	<u>3</u>	<u>54.90</u>
Address <u>6375 Tassing Rd</u>				Purpose <u>Food - fundraiser</u>									
City <u>Columbus</u>				State <u>Oh</u>		Zip Code <u>43068</u>		Check Number <u>1088</u>					
To Whom Paid <u>Kroger</u>							M	D	Y	Amount			
							<u>0</u>	<u>9</u>	<u>0</u>	<u>4</u>	<u>1</u>	<u>3</u>	<u>41.93</u>
Address <u>6962 E Main St</u>				Purpose <u>Food - fundraiser</u>									
City <u>Reynoldsburg</u>				State <u>Oh</u>		Zip Code <u>43068</u>		Check Number <u>1089</u>					
To Whom Paid <u>Kroger</u>							M	D	Y	Amount			
							<u>0</u>	<u>9</u>	<u>0</u>	<u>8</u>	<u>1</u>	<u>3</u>	<u>118.77</u>
Address <u>850 S. Hamilton</u>				Purpose <u>Food / Drink / Ice</u>									
City <u>Whitehall</u>				State <u>Oh</u>		Zip Code <u>43213</u>		Check Number <u>1092</u>					
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.