Event Date	
Page	80

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full						
Kalmer Fo	ir Scho	ol Board				
Ohio Secretary			м 0 7	D 0 3	9 0 9	Amount \$ 25,00
Address	Purpose C		<u> </u>			
Columbus	State () }	Zip Code	Check N	fumber 2720	11217	
To Whom Paid Sign A Rama			M 0 7	D	9 0 9	Amount \$81.13
Address 3814 Fishinger Blvd	Purpose	magnets		1	<u> </u>	(i Viria
City (+illiard	State O H	Zip Code 43026	Check N	umber	*Milkerstyll;	
To Whom Paid Ohio Ethics Comm	<u>Vission</u>		м 09	D よ1	у 0 9	Amount \$ 20,00
Address	Purpose	cial Disclosure S	tater	<u> </u>	<u> </u>	
Columbus	State ()	Zip Code	Check N	umber 100		
To Whom Paid PC Signs			M (0	D 03	9 0 9	Amount \$ 1916.31
Address 2534 Commerce Blvd	Purpose	lard Signs		·	- J	
Cincinnati	State 0 H	Zip Code 45241	Check No	umber 003)	ALSO RESERVE
To Whom Paid Chase Bank			м 10	D 08		Amount \$ 25,00
Address	Purpose fee					
City	State	Zip Code	Check Nu	mber		
To Whom Paid Postcards Columbus		6000/0000000000000000000000000000000000	м 0	D 19	9 09	Amount \$ 192.15
372 East Main St	Purpose FA	yers			•	
Columbus	State	^{2ip Code} 43215	Check Nu	mber 00 h	- Landers	
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City City	State	Zīp Code	Check Nu	mber		

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
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