Event Date	#######
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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full							
Whitehall City Schools Levy Co	mmittee		*****				
To Whom Paid			М	D	Y	Amount	
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City	State	Zip Code	Cileck	MIHOEL			
To Whom Paid			М	D	Y	Amount	
Address	Purpose						
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						25/26/2010/00/25/25/2	

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 \$	961.00
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