Event Date	#######
Page	1

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Fuli				i		
Citizens for Ron Grossman						
To Whom Paid			M D Y	Amount		
Ron Grossman			0 9 1 2 1 1	132.00		
Address	Purpose					
3143 Park St	USPS; Postage Stamps for Invitations					
City	State Zip Code		Check Number	(Table 1)		
Grove City	O H	+ 43123	92			
To Whom Paid		•	M D Y	Amount		
Ron Grossman		·	0 9 1 2 1 1	113.70		
Address	Purpose					
3143 Park St		Staples; Thank You Cards, Envl & Paper for Invitations				
City	i i	ip Code	Check Number			
Grove City	O H	43123	92			
To Whom Paid			M D Y	Amount		
Ron Grossman			0 9 2 0 1 1	81.92		
Address .	Purpose					
3143 Park St		tplace; Food fo				
City		Lip Code	Check Number	and the second		
Grove City	OH	4 <u>3</u> 123	93			
To Whom Paid			M D Y	Amount		
Ron Grossman			0 9 2 0 1 1	231.38		
Address	Ригроѕе					
3143 Park St		e; Food for Fun				
City		Zip Code	Check Number			
Grove City	OH	43123	93	The state of the s		
To Whom Paid	·-		M D Y	Amount		
Ron Grossman			0 9 2 0 1	1 31.48		
Address	Purpose	:		•		
3143 Park St		e; Food for Fun				
City	1 . 1	Zip Code	Check Number	The state of the state of		
Grove City	OH	43123	93	Section And Pro-		
To Whom Paid			M D Y	Amount		
		· .				
Address	Ригроѕе					
			Check Number			
City	State	State Zip Code		Samuel Same		
		<u> </u>				
To Whom Paid			M D Y	Amount		
Address	Purpose					
			Tax 2002			
City	State	Zip Code	Check Number	The same of the property of the same of		
				The River of the		

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.