J \	F
R.C.	3517.10

Event Date	8/7/2008
Page	1

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full				***************************************		restance and an experience of the control of the co		
FRIENDS OF JOHN O'GRADY								
To Whom Paid			М	D	Y	Amount		
CAP CITY DIRECT LLC			0 7	2 8	0 8		1,746.17	
Address	Purpose Purpose							
3242 E 11TH AVE	Priniting							
City	State	Zip Code	Check N	Number				
Columbus	$O \mid H$	43216		2433				
To Whom Paid		**************************************	М	D D	Y	Amount		
KROGER			0 8	0 7	0 8		49.90	
Address	Purpose		1010	0 7	0 0		17.70	
. 144-510	WATER FOR GOLF OUTING							
City	State							
		Zip Code	Check 1	DEBI'	г			
COLUMBUS To Whom Paid	IO H		M	DEDI.	Y	Amount		
					1 . 1	Amount	246.60	
HERMAN FALTER PACKING CO	In		10 8	0 7	0 8		240.00	
	Purpose							
384 GREENLAWN AVE	MEAT FOR GOLF OUTING							
City	State	Zip Code	1	Check Number				
Columbus	O H	43223		DEBI.	gamento marco de la companya della companya della companya de la companya della c			
To Whom Paid			M	D	Y	Amount	0.455.04	
JOS BERNING PRINTING			10 9	1 0	0 8		3,177.94	
Address	Purpose		20					
1850 DALTON ST		UTING MAILING		··········	tetere concentrate			
City	State	Zip Code	Check N	Check Number				
CINCINNATI	OH	45214		2451	ç			
To Whom Paid			M	D	Y	Amount		
RIVIERA GOLF CLUB		····	1 0	0 8	0 8		13,127.76	
Address	Purpose							
8205 Avery Rd	GOLF COURSE EXPENSE							
City	State	Zip Code	Check N	Check Number				
DUBLIN	O H	43017		2463	500 Maria (1900 Ma			
To Whom Paid			М	D	Y	Amount		
CLICKNPLEDGE			1 0	2 0	0 8		109.65	
Address	Purpose							
	ONLINE	CONTRIBUTION	V FEES					
City	State	Zip Code	Check N	lumber				
				AUTO	\supset			
To Whom Paid			М	D	Y	Amount	***************************************	
CLICKNPLEDGE			10	2 0	0 8		12.20	
Address	Purpose							
·	ONLINE CONTRIBUTION FEES							
City	State		Check Number					
·				AUTO)			

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.