31-F
R.C. 3517.10

Event Date /0/1/11	
Page	١

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

N							
Name of Committee in Full Citizens to Elect Dan Miller							
To Whom Paid Holy Spirit			1 0 1 3 1 1	Amount 290.00			
Address 4383 F. Brand St.	Purpose Fou a	1 Certificate	for later do	ate fundraise			
City Wh. Lehall To Whom Paid		Zip Code 43213	Check Number				
To Whom Paid Kroger Address			0 8 2 8 1 1	Amount			
Address 850 S. Ham: Iton Rd. City (1/1/11)	Purpose 5. I 1	Drinks for Fundr	ciser				
Whitekell	State O 14	Zip Code √3213	Credit	3 mg **			
Beer Dock East			M D Y /	81.45			
125 Robinwood Aue	Purpose Becr	for fund-raiser					
Whitehall	State OH	Zip Code 43213	Check Number Credit	man massing make below the			
To Whom Paid			M D Y	Amount			
Address	Purpose	-	· · · · · ·				
City	Sta te	Zip Code	Check Number	en e			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·	·	M D Y	Amount			
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City	Sta te	Zip Code	Check Number	िया जास्य है। सब ब्रह्मण देशी (स्तु स			
To Whom Paid	·		M D Y	Amount			
Address	Purpose		<u> </u>				
City	Sta te	Zip Code	Check Number	ು ಎಂತೆ ಫ್ರಾನಿಜ್ಞಾನಿಗಳ ಅತ್ಯಾಪ್ ನಿರ್ಣ			
To Whom Paid			M D Y	Amount			
Address	Purpose						
City	Sta te	Zip Code	Check Number	a be a second			
	<u> </u>	<u> </u>					

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.