

Date	10/23/2019	Page 8

Statement of Expenditures for Social or Fund-Raising Event

Form 31-F R.C. 3517.10

Full Name of Committee						
Citizens for Paul Dorothy						
·						
To Whom Paid			Date (MM/DD/YYYY)	Amount		
Jets Pizza			10/23/2019 \$70.00			
Street Address Purpose						
660 High St	Fund Raiser Food					
City	State	Zip Code	Check Number	<u> </u>		
Worthington	ОН	43085				
To Whom Paid		······································	Date (MM/DD/YYYY)	Amount		
Porch Growler			10/23/2019	\$58.06		
Street Address Purpose						
890 High St, Ste C	Fund F	Fund Raiser Beverages				
City	State	Zip Code	Check Number			
Worthington	ОН	43085				
To Whom Paid			Date (MM/DD/YYYY)	Amount		
Street Address	et Address Purpose					
City	State	Zip Code	Check Number			
To Whom Paid			Date (MM/DD/YYYY)	Amount		
Street Address Purpos		· · · · · · · · · · · · · · · · · · ·		<u></u>		
City	State	Zip Code	Check Number			
To Whom Paid			Date (MM/DD/YYYY)	Amount		
Street Address Purpose			<u> </u>			
City	State	Zip Code	Check Number			
		· · · · · · · · · · · · · · · · · · ·				

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.

!				
Pag	e To	tal \$	3.06	