Event Date	9-18-2009 #######
Page	To the second se

## Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full								
Paley for Columbus				201200200000000000000000000000000000000	000000000000000000000000000000000000000			
To Whom Paid			М	D	Y A	Amount		
Giant Eagle			0 9	1 0	0 9		114.05	
Address	Purpose							
6867 E. Broad Street	Food for FR							
City	State	Zip Code	Check N					
Reynoldsburg	$O \mid H$	43068		549				
To Whom Paid			М	D	8	Amount		
Giant Eagle			0 9	1 0	0 9		121.95	
Address	Purpose							
6867 E Broad Street	Paper Goods - Supplies							
City	State	Zip Code	Check N	Number				
Reynoldsburg	O H	43068		1413				
To Whom Paid	200 C C C C C C C C C C C C C C C C C C		М	D	Y	Amount		
Address	Purpose							
		Zip Code	Name of the last o					
City	State	Check N	Check Number					
To Whom Paid			М	D	Y	Amount		
						· · · · · · · · · · · · · · · · · · ·		
Address Purpose								
City	State	Zip Code	Check 1	Number				
To Whom Paid	1900000		М	D	Y	Amount		
Address	Purpose							
City	State	Zip Code	Check 1	Number				
				<del></del>	N 7			
To Whom Paid			M	D	Y	Amount		
Address	Purpose							
City	State	State Zip Code		Check Number				
					7,	<b>V</b>		
To Whom Paid			М	D	Y	Amount		
						<u> </u>		
Address	Purpose							
					oper 000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
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.

Page Total \$ 236.00	
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