

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Paley for Columbus								
To Whom Paid Giant Eagle					M 0 9	D 1 0	Y 0 9	Amount 114.05
Address 6867 E. Broad Street		Purpose Food for FR						
City Reynoldsburg		State O H	Zip Code 43068		Check Number 549			
To Whom Paid Giant Eagle					M 0 9	D 1 0	Y 0 9	Amount 121.95
Address 6867 E Broad Street		Purpose Paper Goods - Supplies						
City Reynoldsburg		State O H	Zip Code 43068		Check Number 1413			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
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.