

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full FRIENDS FOR KEYES - STEVEN KEYES, Treasurer - 206 N. BEXLEY AVE. - BEXLEY OH 43209							
To Whom Paid KROGER (EAST MAIN ST. IN BEXLEY)				M	D	Y	Amount \$ 166.13
Address 2000 EAST MAIN ST.		Purpose CAMPAIGN KICK-OFF					
City COLUMBUS (BEXLEY)		State OH	Zip Code 43209	Check Number (DEBIT CARD)			
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			
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.