

Event Date 5,13,09

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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Priscilla Tyson									
To Whom Paid Sam's Club						M 0 5	D 0 8	Y 0 9	Amount 117.32
Address 3950 Morse Road				Purpose Beverages for Fundraiser					
City Columbus				State O H	Zip Code 43219	Check Number 249			
To Whom Paid Events by Linzy						M 0 5	D 1 3	Y 0 9	Amount 507.00
Address 112 Jefferson Avenue, 2nd Floor				Purpose Fundraiser Catering					
City Columbus				State O H	Zip Code 43215	Check Number 250			
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.

Page Total \$ 624.32