

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Bonnie Michael								
To Whom Paid The Andersons					M	D	Y	Amount 29.05
Address Sawmill Store					Purpose Food for Campaign Support Fund Raiser			
City Dublin					State O H	Zip Code 43016	Check Number 5124	
To Whom Paid GFS Marketplace					M	D	Y	Amount 74.15
Address 3901 Dublin Granville Rd					Purpose Food for Campaign Support Fund Raiser			
City Dublin					State O H	Zip Code 43016	Check Number 5120	
To Whom Paid Kroger					M	D	Y	Amount 128.39
Address Worthington Square Mall					Purpose Food for Campaign Support Fund Raiser			
City Worthington Square Mall					State O H	Zip Code 43085	Check Number 5125	
To Whom Paid Sam's Club					M	D	Y	Amount 49.17
Address Dublin					Purpose Food for Campaign Support Fund Raiser			
City Dublin					State O H	Zip Code 43016	Check Number	
To Whom Paid Kroger					M	D	Y	Amount 51.13
Address Worthington Square					Purpose Food for Campaign Support Fund Raiser			
City Worthington					State O H	Zip Code 43085	Check Number 5126	
To Whom Paid Shari Diranfeld					M	D	Y	Amount 20.08
Address					Purpose Support for the Campaign Fund Raiser			
City Worthington					State O H	Zip Code 43085	Check Number 5128	
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.