Event Date	May24,11
Page	1

## Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

<u> </u>									
Name of Committee in Full									
Citizens for Bonnie Michael									
To Whom Paid			M	D	Y	Amount			
The Andersons			0 5	2 3	$1 \mid 1$		29.05		
Address	Purpose								
Sawmill Store	Food for Campaign Support Fund Raiser								
City	State					No. W. L.			
Dublin	OH	43016		5124					
To Whom Paid	<del>-</del> :	<u>.</u>	М	D	Y	Amount			
GFS Marketplace		•	0 5	2 3	1   1		74.15		
Address	Purposc	<del>-</del>				<del>.</del>			
3901 Dublin Granville Rd	Food for C	Food for Campaign Support I				Fund Raiser			
City	State					100			
Dublin	$O \mid H$	43016		5120		14			
To Whom Paid	, 0 ,	<u> </u>	М	D	Y	Amount			
Kroger			0 5	2 3	1   1		128.39		
Address	Purpose	_	1 - 1 -	<u>,                                    </u>					
Worthington Square Mall	Food for Campaign Support Fund Raiser								
City	State	Zip Code	Check 1						
Worthington Square Mall	ОН	43085		5125					
To Whom Paid	<u>, C ,</u>		М	D	Y	Amount			
Sam's Club			015	2 4	$\lfloor 1 \rfloor 1$		49.17		
Address	Purpose		1 1 -				<del>-</del>		
Dublin	Food for Campaign Support Fund Raiser								
City	State	Zip Code	Check 1			S. William Val.			
Dublin	$  \cap   H$	43016		_		San American			
To Whom Paid	<u> </u>		М	D	Y	Amount			
Kroger			0 5	2 4	1 1	1	51.13		
Address	Purpose		1 - , -	<u>,                                    </u>					
Worthington Square	Food for Campaign Support Fund Raiser								
City	State	Zip Code	Cheek Number		<b>新</b>				
Worthington	$O \mid H$	43085		5126	,				
To Whom Paid	10,11		M	D	Y	Amount			
Shari Diranfeld		<i></i>	0 6	0 2	$ _{1 1}$		20.08		
Address	Purpose		1010	1.012	1-1-				
	Support f	und I	Raiser						
City	State	Zip Code		Number		Skiff			
Worthington	O   H	43085		5128	;	W. 3			
To Whom Paid	10111		M	D D	Y	Amount			
			1 1	1 1	+				
Address	Purpose			1 !		I			
		• • •							
City	State	Zip Code	Check	Number		4			
	1	] '				April 1			
	<u> </u>	<u></u>				(			

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 \$ \_\_\_\_351.97