

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Committee for Wade Steen								
To Whom Paid Moretti's of Upper Arlington					M 0	D 7	Y 1	Amount 1,127.18
Address 2124 Tremont Center		Purpose Catering for Fundraising Event						
City Upper Arlington		State O	H H	Zip Code 43221	Check Number 1058			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	Zip Code	Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	Zip Code	Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	Zip Code	Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	Zip Code	Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	Zip Code	Check Number			
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City		State	H	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.