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Event Date	######
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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full									
Friends for Ginther									
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793 North High St.	Food and drink								
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City	State	Zip Code		Check N	lumber				
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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 \$ 1.901.25