

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full CITIZENS FOR TOM BAKER												
To Whom Paid JED'S FIREBALLS & BREW						M 0	D 4	Y 0	Y 3	Y 1	Y 3	Amount \$467.11
Address 3799 MILL RUN DRIVE				Purpose FUND RAISING SOCIAL								
City HILLIARD				State OH		Zip Code 43026		Check Number DEBIT CHARGE				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		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.