



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee				
Committee to Re-Elect James W. Brown				
To Whom Paid		Date (MM/DD/YYYY)		Amount
Squareup		09/13/2018		\$4.13
Street Address		Purpose		
1455 Market Street, Suite 600		fee on deposit of \$150 from Christopher Heckert & Assoc.		
City	State	Zip Code	Check Number	
San Francisco	CA	94103	EFT	
To Whom Paid		Date (MM/DD/YYYY)		Amount
City Tavern		09/13/2018		\$337.87
Street Address		Purpose		
697 North 4th Street		food and beverage for fundraising event 9/13/18 at City Tavern		
City	State	Zip Code	Check Number	
Columbus		43215	Credit Card	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street 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.