

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

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|---|-------------|-------------------------------------|----------------------|--------------------|
| Name of Committee in Full Paula Brooks Committee | | | | |
| To Whom Paid Tony's Restaurant | M 4 | D 29 | Y 14 | Amount \$873.40 |
| Address 16 W Beck St | | Purpose Event Venue and Catering | | |
| City Columbus | State OH | Zip Code 43215-5609 | Check Number 6163 | |

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.