

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Lori M. Tyack							
To Whom Paid U. S Postmaster				M 0	D 9	Y 2	Amount 13.00
Address		Purpose postage for invitations					
City West Worthington	State O	H H	Zip Code 43235	Check Number check card			
To Whom Paid U. S Postmaster				M 0	D 9	Y 2	Amount 260.00
Address		Purpose postage for invitations					
City West Worthington	State O	H H	Zip Code 43235	Check Number 0215			
To Whom Paid Office Max				M 1	D 0	Y 0	Amount 70.43
Address 5780 Britton Parkway		Purpose office supplies					
City Dublin	State O	H H	Zip Code 43017	Check Number 0216			
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.