

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full											
CITIZENS SUPPORTING WHITEHALL SCHOOLS											
To Whom Paid					M	D	Y	Amount			
PLAY IT AGAIN SPORTS					0	9	2	1	1	8	553.87
Address				Purpose							
6011 E. MAIN ST.				TEE SHIRTS							
City				State		Zip Code		Check Number			
COLUMBUS				O   H		43213		1004			
To Whom Paid					M	D	Y	Amount			
PLAY IT AGAIN SPORTS					0	9	2	1	1	8	542.86
Address				Purpose							
6011 E. MAIN ST.				TEE SHIRTS							
City				State		Zip Code		Check Number			
COLUMBUS				O   H		43213		1004			
To Whom Paid					M	D	Y	Amount			
Address				Purpose							
City				State		Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount			
Address				Purpose							
City				State		Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount			
Address				Purpose							
City				State		Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount			
Address				Purpose							
City				State		Zip Code		Check Number			
To Whom Paid					M	D	Y	Amount			
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.