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Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Priscilla Tyson										
To Whom Paid USPS				M 0	D 5	Y 2	Y 5	Y 1	Y 1	Amount \$228.80
Address 200 N High Street				Purpose Fundraiser Mailing						
City Columbus				State OH		Zip Code 43215		Check Number Debit		
To Whom Paid Columbus A Renaissance Hotels				M 0	D 6	Y 1	Y 5	Y 1	Y 1	Amount \$1,813.05
Address 50 N Third Street				Purpose Fundraiser Catering & Venue						
City Columbus				State OH		Zip Code 43215		Check Number Debit		
To Whom Paid				M	D	Y				Amount
Address				Purpose						
City				State OH		Zip Code		Check Number		
To Whom Paid				M	D	Y				Amount
Address				Purpose						
City				State OH		Zip Code		Check Number		
To Whom Paid				M	D	Y				Amount
Address				Purpose						
City				State OH		Zip Code		Check Number		
To Whom Paid				M	D	Y				Amount
Address				Purpose						
City				State OH		Zip Code		Check Number		
To Whom Paid				M	D	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.

\$2,041.85
Page Total \$