

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

| | | | | | | | | |
|--|--|---------------------------------|---------------|--------------------------|-----------------------------|---------------|---------------|-------------------------|
| Name of Committee in Full Friends For Porter Committee | | | | | | | | |
| To Whom Paid Barcelona | | | | | M 0 | D 3 | Y 0 | Amount 100.00 |
| Address 263 Whittier St | | Purpose Event Deposit | | | | | | |
| City Columbus | | State O | H H | Zip Code 43206 | Check Number 0002 | | | |
| To Whom Paid Barcelona | | | | | M 0 | D 3 | Y 2 | Amount 311.94 |
| Address 263 Whittier St | | Purpose Food | | | | | | |
| City Columbus | | State O | H H | Zip Code 43206 | Check Number 101 | | | |
| 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 | | | |
| 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.