

Date	6/26/19	Page
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## Statement of Expenditures for Social or Fund-Raising Event

Form 31-F R.C. 3517.10

			<u> </u>	
Full Name of Committee				
Friends of Neal Whitman				
To Whom Paid			Date (MM/DD/YYYY)	Amount
Vicks Pizza			6/26/19	60.00
Street Address	Purpose			
7345 E. Main St	Pizza and	drinks		
City	State Zi	p Code	Check Number	
Reynoldsburg	OH 🔽 4	3068	Cash	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State Zi	p Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State Zi	p Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State Zi	p Code	Check Number	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose		1	
City	State Zip	p 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.

60.00	
Page Total \$ 60.00	