

Event Date	08 29 15
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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Quincel								
To Whom Paid Kroger					M	D	Y	Amount
					0	8	2	22.52
Address 1045 Hill Road N.		Purpose chips/snacks for fundraiser						
City Pickerington		State O H	Zip Code 43147	Check Number debit card				
To Whom Paid Deals					M	D	Y	Amount
					0	8	2	7.53
Address 3632 East Main Street		Purpose paper products for fundraiser						
City Whitehall		State O H	Zip Code 43213	Check Number debit card				
To Whom Paid Little Caesars					M	D	Y	Amount
					0	8	2	50.00
Address 4347 East Main Street		Purpose pizza for fundraiser						
City Whitehall		State O H	Zip Code 43213	Check Number debit card				
To Whom Paid Little Caesars					M	D	Y	Amount
					0	8	2	50.00
Address 4347 East Main Street		Purpose pizza for fundraiser						
City Whitehall		State O H	Zip Code 43213	Check Number debit card				
To Whom Paid Little Caesars					M	D	Y	Amount
					0	8	2	50.00
Address 4347 East Main Street		Purpose pizza for fundraiser						
City Whitehall		State O H	Zip Code 43213	Check Number debit card				
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.

Page Total \$	180.05
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