Event Date	
Page	

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Palmer For School Board							
To Whom Paid This Week News!)apers		M D 1023	Υ 0 9	Amount # 251,46		
Address 7801 N. Central Dr. advertisement							
Lewis Center		Zip Code	Check Number				
To Whom Paid The Columbus Messeng Address	ier Ga	mpany	M D 1 0 3 6	y 0 9	Amount #571,80		
Address 3500 Sullivant Ave		ertisement					
Columbus	State 0 1-H	Zip Code 43a04	Check Number				
To Whom Paid This Week Newspapers			M D 1026	¥ 0 9	Amount B 207,69		
Address 7801 N. Central Dr.	Purpose	ertisement					
city Lewis Center		Zip Code	Check Number	,			
To Whom Paid The Columbus Messena	ner Con	npany	M D 1 1 0 2 6	y 0 9	Amount は 1063.80		
Address 3500 Sullivant the advertisement							
Columbus	State 0 H	Zip Code せ3ス0け	Check Number				
To Whom Paid Chase Bank			M D 1 0 3 0	ч 0 А	Amount \$ 10.00		
Address	Purpose VAY	nk fee					
City	State	Zip Code	Check Number				
To Whom Paid Chase Bank			M D 1 3 0	9 0	Amount あんんの		
Address	Purpose Oanl	r fee					
City		Zip Code	Check Number				
To Whom Paid G2 Print Plus			M D 1 0	y 0 9	Amount \$76.86		
Address 3787 Interchange Rd	Purpose	shirts					
Columbus Columbus	State	Zip Code H3ぇ04	Check Number	7			

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 \$ 3,197,61