

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>RE-Elect Westcamp Mayor</u>									
To Whom Paid <u>Birch Tavern</u>						M	D	Y	Amount <u>200.00</u>
Address <u>639 MAIN St.</u>						Purpose <u>Fundraiser</u>			
City <u>Grovesport</u>						State <u>OH</u>	Zip Code <u>43125</u>	Check Number <u>CASH</u>	
To Whom Paid <u>Little Italy</u>						M	D	Y	Amount <u>300.00</u>
Address <u>619 MAIN St</u>						Purpose <u>Fundraiser - Food</u>			
City <u>Grovesport</u>						State <u>OH</u>	Zip Code <u>43125</u>	Check Number <u>CASH</u>	
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	
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	
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.