Event Date	10 3 13
Page	218

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

	Prescribed by Secretar) 07 Otatie 42 0 .			
aine of Committee in Full					
Citizens for Chris Long			M D Y Amount		
o Whom Paid			1 0 0 2 1 3	172.84	
GFS	In		110012110		
ddress	Purpose				
6375 Tussing Road	Food & Supplies State ZpCode Check Number				
îty	1 1	43068	Debit		
Reynoldsburg	<u> </u>	40000	M D Y Amount		
o Whom Paid			1 0 0 2 1 3	50.82	
Giant Eagle	Ригрозе				
Address Charact	Food				
6867 E. Broad Street	State ZipCode Check Number				
Calumahara	O H	43213	Debit		
Columbus To Whom Paid			M D Y Amount		
GFS			1 0 0 8 1 3	(9.62)	
Arktress	Ригром				
6375 Tussing Road	Refund/Return				
City	State Z	ip Code	Check Number		
Reynoldsburg	O H	43068	Debit MS D1 Y1 Amount		
To Whom Paid		_	M D Y Amount		
Address	Purpose				
			Check Number		
City	State 2	Zip Code	Check istance		
			M D Y Amount		
To Whom Paid					
Address	Purpose				
	State	Zip Code	Check Number		
City	Sinc	14 0000	l .		
			M D Y Amount		
To Whom Paid					
	Purpose				
Address					
	State	Zip Code	Check Number		
City					
To Whom Paid	<u> </u>		M D Y Amount		
10 ANDRIT GR					
Address	Purpose				
Low en		_			
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 \$	214.04
---------------	--------