Event Date	7/27/11	
Page 18	<u> </u>	

## Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo				
To Whom Paid			M D Y	Amount
Erik Gresak		•	0 7 2 7 1 1	\$475.00
Address	Рштроѕе	<del></del>	· · · · · · · · · · · · · · · · · · ·	
961 S High St	Food & Be	verage; 7/27 Event		
City		State Zip Code Check Number		
Columbus	OH	43206	2184	
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City	Sta te	Zip Code	Check Number	- 7
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Address	Purpose		11 (11	
	[ .			
City	State	Zip Code	Check Number	
	OH			
	- 011			, , ,

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.

\$475.00 Page Total \$