



# Statement of Expenditures for Social or Fund-Raising Event

Form 31-F  
R.C. 3517.10

## Full Name of Committee

Friends for Michael Farley Committee

To Whom Paid Pins Mechanical		Date (MM/DD/YYYY) 09/19/2019		Amount 270.05	
Street Address 141 North 4th Street		Purpose Fundraiser			
City Columbus		State OH	Zip Code 43215	Check Number n/a	
To Whom Paid		Date (MM/DD/YYYY)		Amount	
Street Address		Purpose			
City		State OH	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount	
Street Address		Purpose			
City		State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount	
Street Address		Purpose			
City		State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount	
Street 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 \$ 270.05