

# Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>CITIZENS FOR CARRIER</b>				
To Whom Paid <b>HERITAGE GOLF CLUB</b>	M	D	Y	Amount <b>425.67</b>
Address <b>3525 HERITAGE CLUB DRIVE</b>	Purpose <b>FACILITY EXPENSE FOR FUNDRAISER</b>			
City <b>HILLIARD</b>	State <b>O</b>	Zip Code <b>H 43026</b>	Check Number <b>139</b>	
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.