

Event Date 10/9/13

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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens Committee for Persons with DD							
To Whom Paid BD Mongolian Grill				M 0	D 9	Y 3	Amount 150.00
Address 3977 Wirtz Avenue		Purpose Honorarium - gift certificate					
City Columbus	State O	H H	Zip Code 43219	Check Number 1395			
To Whom Paid Dave Powers				M 1	D 0	Y 1	Amount 800.00
Address 4320 Scenic Drive		Purpose Entertainment for Star Awards					
City Columbus	State O	H H	Zip Code 43214	Check Number 1396			
To Whom Paid Villa Milano				M 1	D 0	Y 7	Amount 11,213.17
Address 1630 Schrock Rd		Purpose Food for Star Awards					
City Columbus	State O	H H	Zip Code 43229	Check Number 1397			
To Whom Paid				M 	D 	Y 	Amount
Address		Purpose					
City	State 	H	Zip Code	Check Number			
To Whom Paid				M 	D 	Y 	Amount
Address		Purpose					
City	State 	H	Zip Code	Check Number			
To Whom Paid				M 	D 	Y 	Amount
Address		Purpose					
City	State 	H	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 \$ 12,163.17