3	1-	F			
R	C.	35	17.	1	0

Event Date	10.02.08
Page	1

## Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full	- Commence of the commence of	manus and thickle							
Name of Committee in Full									
Citizens for Lori Tyack	***************************************	-		М	D	Y	Amount		
To Whom Paid				1		1 1	1	1,901.25	
Bar of Modern Art								1,701.40	
Address	Purpose Fundraiser - Event Space Rental								
583 East Broad Street	Fundra State		r - Event Space Re Zip Code	Check N	Jumber				
City	1	- 1	43215	0263					
Columbus		H	43413	M	D D	Y	Amount		
To Whom Paid				141					
Address	Purpose								
							100000000000000000000000000000000000000		
City	State		Zip Code	Check N	lumber				
To Whom Paid				М	D	Y	Amount		
								4.000 410 11000000	
Address	Purpose								
City	State Zip Code		Zip Code	Check Number					
		4		1 1	Г	ΙΥ	Amount		
To Whom Paid				M	D	X	AIHOUIII		
Address	Purpose								
City	State Zip Code			Check Number					
To Whom Paid	1			М	D	Y	Amount		
10 mm. 1 mm									
Address	Purpose	Purpose					. ц.		
City	State Zip Code			Check	Check Number				
To Whom Paid	1	************		М	D	Y	Amount		
Address	Purpose				<u> </u>		. н		
City	State Zip Code			Check Number					
To Whom Paid	L	CONTRACTOR	1	М	D	Y	Amount		
Address	Purpose				1		_1		
Production ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (									
City	State		Zip Code	Check	Number				
					PARTITION OF THE PARTIT			nggaggagagan kan kanalas kan	

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.