

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full Reynoldsburg Republican Club							
To Whom Paid Sandra Long				M	D	Y	Amount
				0	5	3 0 1 2	\$83.33
Address 1675 Haft Dr		Purpose Reimbursement for Invitations & misc					
City Reynoldsburg	State OH	Zip Code 43068	Check Number 1076				
To Whom Paid Penny Basye				M	D	Y	Amount
				0	5	1 6 1 2	\$307.23
Address 8785 Linick Dr		Purpose Reimbursement for programs & misc					
City Reynoldsburg	State OH	Zip Code 43068	Check Number 1075				
To Whom Paid Trophyworks LLC				M	D	Y	Amount
				0	5	3 0 1 2	\$96.30
Address 55 Winstead Circle		Purpose Presidents award Plaque					
City Granville	State OH	Zip Code 43023	Check Number 1077				
To Whom Paid Jefferson Golf & Country Club				M	D	Y	Amount
				0	6	0 5 1 2	\$1,399.82
Address 7271		Purpose Lincoln Dinner Facilities & Services					
City Jefferson Meadows Dr	State Blacklic	Zip Code 43004	Check Number 1078				
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City				State	Zip Code	Check Number	
				OH			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City				State	Zip Code	Check Number	
				OH			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City				State	Zip Code	Check Number	
				OH			

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.

\$1,886.68
Page Total \$ _____