3	1	-F	
R	c	3517	10

Event Date	7/12/07	
Page		

## Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

51 CO 11 F 11							
Name of Committee in Full Gibbs 4 Kids Committee							
To Whom Paid John Caldwell			0 7 1	2 0 7	Amount \$75.00		
Address	Purpose DJ Fundra						
City Columbus	State OH	Zip Code	Check Number	er			
To Whom Paid			M D	Y	Amount		
Address	Purpose						
City	State OH	Zip Code	Check Number				
To Whom Paid	· · · · · · · · · · · · · · · · · · ·		M D	Y	Amount		
Address	Purpose	Purpose					
City	State OH	Zip Code	Check Number				
To Whom Paid			MD	Y	Amount		
Address	Purpose	Purpose					
City	Stajte OH	Zip Code	Check Numb	er			
To Whom Paid			M D	Y	Amount		
Address	Purpose						
City	State OH	Zip Code	Check Numb	er			
To Whom Paid			M	Y	Amount		
Address	Purpose						
City	Sta <sup>t</sup> te OH	Zip Code	Check Number				
To Whom Paid			MD	Y	Amount		
Address	Purpose						
City	Stalte OH	Zip Code	Check Numb	er			

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.

\$75.00
Page Total \$