

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Friends of O'Grady Committee							
To Whom Paid Patrick McSweeney				M 0	D 8	Y 0	Amount 195.99
Address 2000 Quarry Crest Dr.		Purpose Golf Outing Photos					
City Columbus	State O H	Zip Code 43204	Check Number 2305				
To Whom Paid Riviera Golf Club				M 0	D 8	Y 0	Amount 13,012.22
Address 6205 Avery Rd.		Purpose Golf Outing					
City Dubline	State O H	Zip Code 43017	Check Number 2302				
To Whom Paid Robert Bisciotti				M 0	D 8	Y 0	Amount 1,049.76
Address 6059 Homewell St.		Purpose Reimbursement for Water & Signs for Golf Outing					
City Hilliard	State O H	Zip Code 43026	Check Number 2301				
To Whom Paid Sharon Keels				M 0	D 8	Y 0	Amount 52.47
Address 1810 Roberts Pl.		Purpose Reimbursement for Golf Outing expenditures					
City Columbus	State O H	Zip Code 43207	Check Number 2300				
To Whom Paid Fullers				M 0	D 8	Y 0	Amount 133.62
Address Columbus		Purpose Golf Outing Food					
City Columbus	State O H	Zip Code 	Check Number 2295				
To Whom Paid JW Cleary Promotional Products				M 0	D 8	Y 0	Amount 481.40
Address 1511 Northwest Blvd.		Purpose Golf Outing Prizes					
City Columbus	State O H	Zip Code 43215	Check Number 2298				
To Whom Paid FastSigns				M 1	D 1	Y 0	Amount 126.41
Address 1744 Hilliard Rome Rd.		Purpose Golf Sponsor Signs					
City Hilliard	State O H	Zip Code 43026	Check Number 2319				

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.