31.	·F		
R.C.	351	7.	10

Event Date	3/26/15	
Page 1		

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

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens To Retain Hood							
To Whom Paid			M	D	Y	Amount	
Prost Beer & Wine Cafe			0 3	2 6	1 5	\$956.66	
Address	Purpose		•				
7354 E. Main St.	Fundraise	Fundraiser food & drinks					
City	Sta te	Zip Code	Check ?	Check Number			
Reynoldsburg	ОН	43068	1015				
To Whom Paid		!	M	D	Y	Amount	
Address	Purpose			1	-	1	
City	Sta te	Zip Code	Check ?	Yumber			
	ОН						
To Whom Paid	1 011		M	D	Y	Amount	
Address	Purpose			. I		<u></u>	
City	Sta te	Zip Code	Check ?	Sumber .			
	OH						
To Whom Paid	<u> </u>	<u>!</u>	М —	D	Y	Āmount	
Address	Purpose		1		!		
City	Sta te	Zip Code	Check ?	Check Number			
	ОН						
To Whom Paid		<u> </u>	М	D	Y	Amount	
					1		
Address	Purpose				!		
City	, State	Zip Code	Check N	Check Number			
	ОН						
To Whom Paid	ļ -	!	М	D	Y	Атоилт	
Address	Purpose			<u> </u>	1		
City	Sia te	Zip Code	Check Number				
	ОН					•	
To Whom Paid	1011	_	M	D	Y	Amount	
						1	
Address	Ригрозе						
	1.444						
City	State	Zip Code	Check N	Sumber			
- •	OH		Circuit	3			
	1011						

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.

\$956.66
Page Total \$