

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Dorrian Committee									
To Whom Paid Milo's Catering						M 1	D 0	Y 2	Amount 1,454.25
Address 980 W Broad St			Purpose Catering/ Food						
City Columbus			State O H	Zip Code 43222	Check Number 3315				
To Whom Paid Milo's Catering						M 1	D 0	Y 2	Amount 668.95
Address 980 W Broad St			Purpose Catering/ Food						
City Columbus			State O H	Zip Code 43222	Check Number 3316				
To Whom Paid Aaron Jackson						M 1	D 0	Y 2	Amount 750.00
Address 2897 Lonfield Rd			Purpose Entertainment/ Band						
City Columbus			State O H	Zip Code 43204	Check Number 3317				
To Whom Paid Milo's Catering						M 1	D 0	Y 2	Amount 156.51
Address 980 W Broad St			Purpose Catering/ Food						
City Columbus			State O H	Zip Code 43222	Check Number 3318				
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 	Zip Code	Check Number				
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 	Zip Code	Check Number				
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 	Zip Code	Check Number				

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.