

D	ate _	09/12/2019	Page 2 2

Statement of Expenditures for Social or Fund-Raising Event

R.C. 3517.10

City Worthington OH 43215 City Date (MM/DD/YYYY) Amount Street Address 809 High Street, Suite C City State OH Date (MM/DD/YYYY) Amount			
Porch Growler			
Street Address 890 High Street, Suite C City Worthington To Whom Paid Street Address 809 High Street, Suite C Purpose Fundraiser Zip Code OH 43215 Date (MM/DD/YYYY) Amount City Street Address 809 High Street, Suite C City State OH Date (MM/DD/YYYY) Amount Date (MM/DD/YYYY) Amount Date (MM/DD/YYYY) Amount To Whom Paid			
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City Worthington OH Value Vorthington OH Vorthingto			
Worthington OH 43215 n/a To Whom Paid Date (MM/DD/YYYY) Amount Street Address 809 High Street, Suite C City State Zip Code OH Date (MM/DD/YYYY) Amount To Whom Paid Date (MM/DD/YYYY) Amount	Fundraiser		
To Whom Paid Street Address 809 High Street, Suite C City State OH OH Date (MM/DD/YYYY) Amount Amount Date (MM/DD/YYYY) Amount Date (MM/DD/YYYY) Amount Date (MM/DD/YYYY) Amount			
Street Address 809 High Street, Suite C City State OH To Whom Paid Purpose Check Number OH Date (MM/DD/YYYY) Amount			
809 High Street, Suite C City State Zip Code Check Number OH To Whom Paid Date (MM/DD/YYYY) Amount			
809 High Street, Suite C City State Zip Code Check Number OH To Whom Paid Date (MM/DD/YYYY) Amount			
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To Whom Paid Date (MM/DD/YYYY) Amount			
Sate (Millings/1111)			
Street Address Purpose			
City State Zip Code Check Number			
To Whom Paid Date (MM/DD/YYYY) Amount	and the second		
Street Address Purpose			
To Whom Paid Date (MM/DD/YYYY) Amount			
Street 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.

1	
	180.00
1	Page Total \$ 180.00