

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full THE ELECT STEVEN M. BENNETT COMMITTEE									
To Whom Paid MEIJER, INC.						M 1	D 0	Y 1	Amount \$123.34
Address 2811 LONDON-GROVEPORT RD.				Purpose FUNDRAISER FOOD, BEVERAGE, AND SUPPLIES					
City GROVE CITY				State OH	Zip Code 43123		Check Number 1036		
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					

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.

\$123.34

Page Total \$