

# Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full Franklin County Republican Party								
To Whom Paid Eric Nordman					M	D	Y	Amount \$177.17
Address 96 East College Ave., Ste. A		Purpose reimburse rental van						
City Westerville	State OH	Zip Code 43081	Check Number 375					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	Zip Code	Check Number					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	Zip Code	Check Number					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	Zip Code	Check Number					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	Zip Code	Check Number					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	Zip Code	Check Number					
To Whom Paid					M	D	Y	Amount
Address		Purpose						
City	State OH	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.

\$177.17  
Page Total \$