

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Pfeiffer for Judge									
To Whom Paid Barbara Pfeiffer						M	D	Y	Amount
						0	1	0	3
						1	2		431.60
Address 14 E Gay Street				Purpose Debt					
City Columbus		State O H		Zip Code 43215		Check Number 1009			
To Whom Paid EOD Consulting, LLC						M	D	Y	Amount
						0	1	0	3
						1	2		173.04
Address 832 S 5th ST				Purpose Debt					
City Columbus		State O H		Zip Code 43206		Check Number 1010			
To Whom Paid EOD Consulting, LLC						M	D	Y	Amount
						0	1	0	3
						1	2		386.96
Address 832 S 5th ST				Purpose Consulting					
City Columbus		State O H		Zip Code 43206		Check Number 1010			
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			
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			