## **Statement of Expenditures**

| Page | 2 |  |
|------|---|--|
| _    |   |  |

Prescribed by Secretary of State 2/01

| Name of Committee in Full            |                      |                           |                | 1                 |
|--------------------------------------|----------------------|---------------------------|----------------|-------------------|
| CAMPBELL FOR JUDGE                   |                      |                           |                |                   |
| To Whom Paid<br>Blue Utopia          |                      |                           | M D Y 1        | Amount<br>\$20.00 |
| Address                              | Purpose<br>Tansactio | Purpose Tansaction Charge |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |
| To Whom Paid Analysis Service Charge |                      |                           | 1 0 1 7 1 1    | Amount<br>\$0.09  |
| Address                              | Ригроѕе              |                           |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |
| To Whom Paid<br>Blue Utopia          |                      |                           | 1 1 0 3 1 1    | Amount<br>\$20.00 |
| Address                              |                      | withdrawal - Trans        | saction charge |                   |
| City                                 | State<br>OH_         | Zip Code                  | Check Number   |                   |
| To Whom Paid                         |                      |                           | M D Y          | Amount            |
| Address                              | Purpose              |                           |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |
| To Whom Paid                         | ·                    |                           | M D Y          | Amount            |
| Address                              | Purpose              |                           |                |                   |
| City                                 | OH State             | Zip Code                  | Check Number   |                   |
| To Whom Paid                         |                      |                           | M D Y          | Атоши             |
| Address                              | Purpose              |                           |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |
| To Whom Paid                         |                      |                           | M D Y          | Amount            |
| Address                              | Purpose              | •                         |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |
| To Whom Paid                         | •                    | ·                         | M D Y          | Amount            |
| Address                              | Purpose              |                           |                |                   |
| City                                 | State<br>OH          | Zip Code                  | Check Number   |                   |