Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full

COMMITTEE TO ELECT ANDREA PEEPLES FOR JUDGE

To Whom Paid		M	D	Y	Amount
THE NETWORK		0 5	2 6	0 5	60.00

Address	Purpose
525 PARK STREET	CATERING

City	State	Zip Code	Check Number	
COLUMBUS	O H	43215	1015	

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	

To Whom Paid		M	D	Y	Amount

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.

Page Total $ 60.00