31-B R.C. 3517.10



## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

| Name of Committee in Full                              |                  |                |              |              |              |            |              |          | —        | !        |
|--|------------------|----------------|--------------|--------------|--------------|------------|--------------|----------|----------|----------|
| Jay Perez for Judge Committee                          |                  |                |              | М            | <b>—</b>     | D          | _            | Y        | Amount   |          |
| To Whom Paid Field Source Management / JAV Productions |                  |                |              |              |              | D<br>2   3 |              |          | CALIVUIL | 7,000.00 |
| Address<br>3246 West Henderson Rd, Apt. A              | Purpose air time |                |              |              |              |            |              |          |          |          |
| City   | Stat             | te             | Zip Code     | Check Number |              |            |              |          |          |          |
| Columbus   |                  | Н              | 43220        | +            | _            | Г.         | <del>,</del> | Ţ.       | Amorri   |          |
| To Whom Paid   |                  |                |              | M            |              | D          |              | Y<br>    | Amount   |          |
| Address  | Purpose          |                |              |              |              |            |              |          |          |          |
| City   | Sta              | te             | Zip Code     | Check Number |              |            |              |          |          |          |
| To Whom Paid   | _                |                |              | М            |              | D          |              | Υ        | Amount   |          |
| Address  | Purpose          | -              |              |              |              |            |              |          |          |          |
| City   | Sta              | Check Number   |              |              |              |            |              |          |          |          |
| To Whom Paid   |                  |                |              | М            |              | D<br>      | Ţ            | Y<br>    | Amount   |          |
| Address  | Purpose          |                |              |              |              |            |              |          |          |          |
| City   | Sta              | Zip Code       | Check Number |              |              |            |              |          |          |          |
| To Whom Paid   |                  |                |              |              |              | D          |              | Y        | Amount   |          |
| Address  | Purpose          |                |              |              |              |            |              |          |          |          |
| City   | Sta              | State Zip Code |              |              |              | umber      |              |          |          |          |
| To Whom Paid   |                  |                |              |              |              | D          | T            | Y<br>    | Amount   |          |
| Address  | Purpose          |                |              |              | _            |            |              |          |          |          |
| City   | Sta              | State Zip Code |              |              | Check Number |            |              |          |          |          |
| To Whom Paid   |                  |                |              | М            |              | D          | $\int$       | Y        | Amount   |          |
| Address  | Purpose          |                |              |              |              |            |              |          |          |          |
| City   | Sta              | State Zip Code |              |              | Check Number |            |              |          |          |          |
| To Whom Paid   | <u> </u>         |                |              | М            |              | D          | Τ            | <b>Y</b> | Amount   |          |
| Address  | Purpose          |                |              |              |              |            |              |          |          |          |
| City   | Sta              | ate            | Zip Code     | Chec         | k Nı         | umber      |              |          |          |          |
|  |                  |                |              |              |              |            |              |          |          |          |