

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee for Judge O'Donnell									
To Whom Paid Columbus Club				M 0	D 7	Y 1	Y 1	Y 4	Amount \$1,021.03
Address 181 East Broad St.		Purpose food & beverages							
City Columbus		State OH	Zip Code 43215		Check Number 1030				
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							
To Whom Paid				M	D	Y	Y	Y	Amount
Address		Purpose							
City		State	Zip Code		Check Number				
		OH							

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.

\$1,021.03
Page Total \$