3	1-	F	
p	c	3517	11

Event Date	09/20/06
Page	14

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full			-						
Committee to Retain Judge Reece									
To Whom Paid			***	М	D	Y	Amount		
Carla Dawkins				0 9	2 7	0 6		120.18	
Address	Purpose		A 1 · · ·						
503 Yale Circle	Reim	burs	ement for invitat	tions					
City		ate	Zip Code	Check N	Number				
Pickerington	0	H	43147		1053	}			
To Whom Paid				М	D	Y	Amount	:	
Athletic Club of Columbus				1110	0 4	0 6		311.73	
Address	Purpose			1210	101.	1010			
136 E. Broad Street	Food/Beverages								
City	State Zip Code			Check Number					
Columbus	0	H	43215		1054	Į			
To Whom Paid	1 0	,tt.	.1.0	М	D	Y	Amount		
				1 -1	1.		i		
Address	Purpose				<u> </u>	<u> </u>			
Audiess	raipose								
Cin	Sti	ate	Zìp Code	Check 1	Jumber				
City	30	ale 	Zip Code	Cilcox	Tunioci				
61 mg				M	D	Y	Amount		
To Whom Paid				I IVI		'	Allount		
	In								
Address	Purpose								
			In: a t	let th					
City	Sta	ate	Zip Code	Check I	Number				
					-	1			
To Whom Paid				M	D	Y	Amount		
							L		
Address	Purpose								
			·						
City	Sta	ate	Zip Code	Check I	Number				
To Whom Paid				M	D	Y	Amount		
						<u> </u>			
Address	Purpose								
City	State Zip Code			Check 1	Check Number				
To Whom Paid				М	D	Y	Amount	.	
							l		
Address	Purpose				•				
City	St	ate	Zip Code	Check 1	Yumber				
			-						
			<u> </u>						

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 \$	431.91
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