| Event Date | 07-04-16 |
|------------|----------|
| Page | 19 |

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

| by | | | | | | | | |
|-----------------------------|--------------------------------|----------|----------------|--------------|--------|-----|---------------------------------------|-------|
| Name of Committee in Full | | | | | | | | |
| REELECT JUDGE BROWNE! (RJB) | | | | | _ | | | |
| To Whom Paid | | | | M | D D | Y | Amount | |
| DOLLAR TREE STORES INC | | | | 0 7 | 0 3 | 1 6 | | 32.25 |
| Address | Purpose | | • | | | | | |
| 4892 MORSE RD | FOURTH OF JULY PARADE SUPPLIES | | | | | | | |
| City | State | | Zip Code | Check N | lumber | | | |
| COLUMBUS | 101 | Η, | 43230 | DEF | BIT C | ARD | | |
| To Whom Paid | | _ | | М | D | Y | Amount | |
| TARGET | | | | 0 6 | 1 4 | 1 6 | | 42.99 |
| Address | Purpose | | | | | | | |
| 1485 POLARIS PARKWAY | FOUR | | OF JULY PARAD | <u>E SUP</u> | PLIE | S | | |
| City | State | Zip Code | Check Number | | | | | |
| COLUMBUS | 0 | H | 43240 | DEF | BIT C | ARD | | |
| To Whom Paid | | | | М | D | Y | Amount | |
| SAM'S CLUB | | | | 0 5 | 2 0 | 1 6 | | 90.48 |
| Address | Purpose | | · - | | | | - | |
| 3950 MORSE RD. | FOURTH OF JULY PARADE SUPPLIES | | | | | | | |
| City | State | : . | Zip Code | Check N | umber | | | |
| COLUMBUS | | H . | 43230 | DEE | BIT C | ARD | | |
| To Whom Paid | | | | М | D | Y | Amount | |
| | | | |]]] | | | | |
| ddress Purpose | | | | | | | | |
| | Ţ | | | | | | | |
| City | State | . 1 | Zip Code | Check N | umber | | | |
| | | | | ļ | | | | |
| To Whom Paid | | | | М | D | Y | Amount | |
| | | | | | . | | | |
| Address | Purpose | | | | | | | |
| | j | | | | | | | |
| City | State | | Zip Code | Check N | umber | | | |
| | | - 1 | |] | | | | |
| To Whom Paid | <u> </u> | | | М | D | Y | Amount | • |
| | | | • | | · · | • | , | - |
| Address | Purpose | | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | | | |
| City | State Zip Code | | | Check N | umber | | | |
| | | | | | | | | |
| To Whom Paid | | • | | М | Ď | Y | Amount | |
| | | | | | | | | |
| Address | Purpose | | | | | | | |
| | | | | | | | | |
| City | State | 1 | Zip Code | Check N | umber | | | |
| | | _ | | | | | | |
| | | | | | | | | |

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 \$ | 165.72 |
|---------------|--------|
| | |