

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee to Elect Ronald Plymale Judge									
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						1	0	0	\$110.00
Address			Purpose						
City			State	Zip Code		Check Number			
			OH						
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	5	0	\$40.00
Address			Purpose						
City			State	Zip Code		Check Number			
			OH						
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	8	1	\$709.16
Address			Purpose						
City			State	Zip Code		Check Number			
			OH						
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	9	2	\$30.00
Address			Purpose						
City			State	Zip Code		Check Number			
			OH						
To Whom Paid The Strategy Network						M	D	Y	Amount
						0	7	1	\$300.00
Address 1349 E Broad St			Purpose Printed Hand Cards						
City Columbus			State	Zip Code		Check Number			
			OH	43215		1009			
To Whom Paid Ronald E. Plymale						M	D	Y	Amount
						0	8	2	\$300.00
Address 111 West Rich Street, Suite 600			Purpose Tee-Shirt Reimbursement						
City Columbus			State	Zip Code		Check Number			
			OH	43215		1013			
To Whom Paid Deborah Sue Roberts						M	D	Y	Amount
						0	6	1	\$300.00
Address 235 Buttles Avenue			Purpose Accounting						
City Columbus			State	Zip Code		Check Number			
			OH	43215		1007			
To Whom Paid Deborah Sue Roberts						M	D	Y	Amount
						0	6	2	\$200.00
Address 235 Buttles Avenue			Purpose Accounting						
City Columbus			State	Zip Code		Check Number			
			OH	43215		1008			