

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full			- ·	_			
Fank Macke for Judge Committee	:						
To Whom Paid				D	Y	Amount	
High Beck			1 : 0	1:6			202.50
Address	Purpose		11-0	11:0	11.0		202.50
	Food/Ref	reshment					
City	State	Zip Code	Check I	Number			
Columbus	O: H	43202		142			
To Whom Paid	10:11	10202	М	D D	Y	Amount	
Address	Purpose			1		<u> </u>	
	1 ,						
City	State	Zip Code	Check ?	Number			
(A)			(
To Whom Paid	<u> </u>	1	М	D	Y	Amount	
TO MINUTE DIST			"		'.	Amount	
Address	Purpose	·····		1		<u></u>	
Abdiess	T di pose						
City	State	Zip Code	Check ?	Vumber			
City	Jiaic	Zip code	Chack	venioei			
To Whom Paid	<u> </u>	l	- M	D	ΙΥ	Amount	
to whom Faid			""		1	Associa	
Address	Purpose			1	<u> </u>	ļ <u> </u>	 -
Address	1 2000						
City	State	Zip Code	Check !	Vumber			
ichy		S.p. 2004	Cincon .	10011041			
To Whom Paid	<u> </u>	<u> </u>	M	D	Y	Amount	
TO WHOM PAID			'''	.	! .	Amoun	
Address	Purpose		!	<u> </u>	<u> </u>	<u> </u>	
Address	i a post						
	State	Zip Code	Check 1	han			_
City	ĺ	2.000	Check,	vuinet			
T 110 0 1	<u>_</u>	<u>!</u>		1 5	1 1/		
To Whom Paid			M	D	Y ;	Amount	
	lp			<u> </u>	Щ.	<u> </u>	
Address	Purpose						
	State	Zip Code	lett-x	Ī			
City	31216	Zip Code	Check 1	number			
T- 110 D-14	<u></u>		1 14	T 5			
To Whom Paid			M	D	Y	Amount	
. 11	D			1	<u></u>		
Address	Purpose						
City	State	Zip Code	Check N	Jumber			
Lay	Jinic	Inp code	CHECK	-u1110C1			
		l	L				

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 \$	202.50
---------------	--------