

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Jay Perez for Judge Committee									
To Whom Paid Due Amici						M 0	D 3	Y 2	Amount 250.00
Address 67 E. Gay Street		Purpose Deposit for 4-20-05 fundraiser							
City Columbus		State O	H H	Zip Code 43215		Check Number 1000			
To Whom Paid MBNA America						M 0	D 3	Y 3	Amount 32.02
Address PO Box 15019		Purpose Staples: 1747 Olentangy River Rd (paper for invitations)							
City Wilimington		State D	E E	Zip Code 19850		Check Number 1010			
To Whom Paid MBNA America						M 0	D 3	Y 3	Amount 148.00
Address PO Box 15019		Purpose USPS: 850 Twin River Dr. (postage)							
City Wilimington		State D	E E	Zip Code 19850		Check Number 1011			
To Whom Paid MBNA America						M 0	D 4	Y 0	Amount 24.99
Address PO Box 15019		Purpose Target: 1717 Olentangy River Rd (paper for invitations)							
City Wilimington		State D	E E	Zip Code 19850		Check Number 1017			
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State		Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State		Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address		Purpose							
City		State		Zip Code	Check Number				

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.