

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full David Tyack for Judge											
To Whom Paid Suzanne E. Marshall						M	D	Y	Amount \$280.00		
Address 260 N. Cassady Ave.						0	1	3	1	1	3
City Columbus			State OH		Zip Code 43209	Check Number 1019					
To Whom Paid Franklin County Republican Party						M	D	Y	Amount \$524.13		
Address 14 East Gay St., 2nd Floor						0	1	3	1	1	3
City Columbus			State OH		Zip Code 43215	Check Number 1020					
To Whom Paid Fifth Third Bank						M	D	Y	Amount \$3.00		
Address P.O. Box 630900						0	1	1	1	1	3
City Cincinnati			State OH		Zip Code 45263	Check Number					
To Whom Paid Fifth Third Bank						M	D	Y	Amount \$3.00		
Address P.O. Box 630900						0	2	1	2	1	3
City Cincinnati			State OH		Zip Code 45263	Check Number					
To Whom Paid Fifth Third Bank						M	D	Y	Amount \$3.00		
Address P.O. Box 630900						0	2	2	1	1	3
City Cincinnati			State OH		Zip Code 45263	Check Number					
To Whom Paid						M	D	Y	Amount		
Address											
City			State OH		Zip Code	Check Number					
To Whom Paid						M	D	Y	Amount		
Address											
City			State OH		Zip Code	Check Number					
To Whom Paid						M	D	Y	Amount		
Address											
City			State OH		Zip Code	Check Number					