Statement of Expenditures

Page _____

Prescribed by Secretary of State 2/01

Name of Committee in Full Woods for Judge Committee			
To Whom Paid			M D Y Amount
Total Loan Payments Made from Form 31-C			0 7 0 8 1 5 \$5,419.91
Address	Purpose		
City	State	Zip Code	Check Number
	ОН		
To Whom Paid			M D Y Amount
Address	Purpose	-	11
City	State	Zip Code	Check Number
T. W D. id	OH		
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	[c
Cuy	OH	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
	OH		
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
	OH		
To Whom Paid			M D Y Amount
Address	Purpose		
City	State OH	Zip Code	Check Number
To Whom Paid	! !		M D Y Amount
			This section
Address	Purpose		
City	State	Zip Code	Check Number
•	OH.	'	Check Number
To Whom Paid	• ፣		M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
	OH _.		