

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Woods for Judge Committee									
To Whom Paid Total Loan Payments Made from Form 31-C						M	D	Y	Amount
						0	7	0	\$5,419.91
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount

Page Total **\$5,419.91**