Event Date	03/31/06
Page	1
Page	т

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full								
Frank Macke for Judge Committee								
To Whom Paid			М	D	Y	Amount	•	
Germania Gessang und Sportwein			0 4	1 2 0	0 6		940.16	
Address	Purpose							
543 S Front St	Fundrais	ser Location						
City	State	Zip Code	Check Number					
Columbus	O H	1024						
To Whom Paid		43215-5626	М	D	Y	Amount		
			1 1					
Address	Purpose					.l		
	i iiiposo							
City	State	Zip Code	Check	Number				
City	State	Zip Code	Check	rumoci				
T- 1/1 P-: 1				I n	Ιν	A	<u> </u>	
To Whom Paid			M	D	Y	Amount		
Address	Purpose							
City	State	Zip Code	Check	Number	umber			
To Whom Paid			М	D	Y	Amount		
					1	1		
Address	Purpose							
City	State	Zip Code	Check	Number				
To Whom Paid			М	D	Y	Amount		
10 Whom I did			} '''		l î	Milouit		
Address	In					<u></u>		
Address	Purpose				-			
		1=7 = 2 · · · · · · · · · · · · · · · · · ·	- I.a					
City	State	Zip Code	Check	Number				
To Whom Paid			M	D	Y	Amount		
]. !			
Address	Purpose							
•								
City	State	Check	Check Number					
						,		
To Whom Paid			М	D	Y	Amount		
				1 1				
Address	Purpose				1 1	L		
, wai 950	i ii pose							
C'.		7: 0.1	louis	NT				
City	State	Zip Code	Check	Number				
		ŀ						

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 \$ 940.16