

Event Date	<u>03/31/06</u> #####
Page	<u>1</u>

# 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 Germania Gessang und Sportwein				M 0	D 4	Y 2	Amount 940.16
Address 543 S Front St		Purpose Fundraiser Location					
City Columbus		State O	Zip Code H 43215-5626	Check Number 1024			
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			
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.

Page Total \$	<u>940.16</u>
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