

| | |
|------------|---------------|
| Event Date | <u>6/9/11</u> |
| Page | <u>68</u> |

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

| | | | | | | | | |
|---|--|---------------------------------|---------------|--------------------------|---------------------------|---------------|---------------|-------------------------|
| Name of Committee in Full David Young for Judge Committee | | | | | | | | |
| To Whom Paid Club 185 | | | | | M 0 | D 6 | Y 1 | Amount 118.70 |
| Address 185 E Livingston | | Purpose Food/Beverage | | | | | | |
| City Columbus | | State O | H H | Zip Code 43215 | Check Number DC | | | |
| 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>118.70</u> |
|---------------|---------------|