Event Date	03/13/06
Page	1

## 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		
Q Bar and Night Club				0   7	0   6		500.00	
Address	Purpose		1010	1017	1010	<del></del>		
205 N Fifth St	Rental F	ee for Fundraiser						
City	State	Check Number						
Columbus	$O \mid H$			1012	2			
To Whom Paid			М	D	Y	Amount		
US Postmaster			013	1018	0 6		117.00	
Address	Purpose		. 1315		15,0	1		
Main Post Office Twin Rivers	Postage for Fundraiser							
City	State	Zip Code	Check 1	Check Number				
Columbus	o   H	43215		1013	3			
To Whom Paid			М	D	Y	Amount		
Address	Purpose	<del> </del>				<u> </u>		
	•							
City	State	Check 1	Jumber					
To Whom Paid	<u> </u>		М	D	Y	Amount		
Address	Purpose			<u> </u>	<u> </u>	<del>-1</del>	·····	
City	State	Zip Code	Check N	Vumber				
To Whom Paid	1		М	D	Y	Amount		
						1		
Address	Purpose	<u>-</u>	<del></del>	<u>-l - l</u>	.1			
	,							
City	State Zip Code		Check N	lumber				
	<b>!</b>							
To Whom Paid	<u> </u>		М	D	Y	Amount		
				1		1		
Address	Purpose					<u> </u>		
City	State	Zip Code	Check Number					
To Whom Paid	I		М	D	Y	Amount		
				1				
Address	Purpose					I		
City	State	Zip Code	Check N	Jumber	<del></del>			
	1	. 1						

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 \$	617.00
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