

# Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>David Tyack for Judge Committee</b>									
To Whom Paid <b>David B. Tyack</b>						M	D	Y	Amount
						0	3	0	\$1,427.31
Address <b>8349 Autumnwood Way</b>				Purpose <b>Reimburse invitations &amp; food for 8/17/07 fundraiser and parade candy</b>					
City <b>Dublin</b>				State <b>OH</b>	Zip Code <b>43017</b>		Check Number <b>1011</b>		
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State	Zip Code		Check Number		
				OH					

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.

\$1,427.31  
Page Total \$