Event Date	g09-21-10
Page	16

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full								
REELECT JUDGE BROWNE! (R	'IB)							
To Whom Paid		<u> </u>	М	D Y	Amount			
BREWERS YARD			1 1	2 4 1 0	500.00			
Address	Purpose			2 1 1 0	300.00			
585 S. FRONT ST.	VENUE I	VENUE RENTAL						
City	State	State Zip Code			17-14-16-16-18-18-18-18-18-18-18-18-18-18-18-18-18-			
COLUMBUS	ОН	43206	1	1020				
To Whom Paid			М	D Y	Amount			
CATERING BY SCOTT			0 9 :	2 1 1 0	346.25			
Address	Purpose							
2980 E. BROAD ST.	FOOD	T						
COLLINABLIC	State	Zip Code	Check Nur					
COLUMBUS To Whom Paid	O H	43209		1027				
			M	D Y	Amount			
OTIS DAVENPORT Address	Durmoso	 	0 9 :	2 1 1 0	350.00			
2500 NIANTIC DRIVE	1	Purpose ENTERTAINMENT						
City	State	Check Number						
COLUMBUS	0 H	Zip Code 43224	1	1028				
To Whom Paid	10 11	40224	M	D Y	Amount			
Address	Purpose	Purpose			<u></u>			
City	State	State Zip Code		nber				
		<u></u>						
To Whom Paid			М	D Y	Amount			
Address	Purpose							
	4)		len i M					
City	State	Zip Code	Check Number					
To Whom Paid			M	D Y	Amount			
10 Whom raid			1 141		Atmodifi			
Address	Purpose							
	1							
City	State	Zip Code	Check Nu	mber	1, 1 m			
l								
To Whom Paid			М	D Y	Amount			
Address	<u> </u>							
City	State	Zip Code	Check Nu	mber				
		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 \$ 1.196.25