Page	1_

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Judge Cocroft Committee	<u>norman na propinska piska piska piska piska ka ka ka piska piska piska piska piska piska piska piska piska pis</u>							
To Whom Paid See Attached Report			M	D	Y	Amount 2,677.21		
Address	Purpose							
City	State	State Zip Code Check Numb						
To Whom Paid			M	D	Y	Amount		
Address	Purpose	Purpose						
City	State	Zip Code	Check N	Number				
To Whom Paid			M	D	Y	Amount		
Address	Purpose			<u></u>	<u> </u>			
City	State	Zip Code	Check N	Number				
To Whom Paid			M	D	Y	Amount		
Address	Purpose		<u> </u>		<u> </u>	-51		
City	State	Zip Code	Check 1	Check Number				
To Whom Paid			M	D	Y	Amount		
Address	Purpose		i i	<u> </u>				
City	State	Zip Code	Check Number					
To Whom Paid			M	D	Y	Amount		
Address	Purpose							
City	State	Zíp Code	Check 1	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	Purpose						
City	State	Zip Code	Check 1	Number				