Statement of Expenditures

Page ____

Prescribed by Secretary of State 2/01

Name of Committee in Full David Tyack for Judge Committee				
To Whom Paid Suzanne E. Marshall			M D Y 0 3 0 1 1 0	Amount \$455.00
Address 260 N. Cassady Ave.	Purpose Accounting	Services	i j 1 1	
City Columbus	State	Zip Code 43209	Check Number 1016	
To Whom Paid Franklin County Republican Party			0 4 0 1 1 0	Amount \$1,000.00
14 East Gay St., 2nd Floor	Purpose Contribution			
City Columbus	State OH	Zip Code 43215	Check Number 1017	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH,	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH _,	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			46° 190 At 1
City	OH State	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			e de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania de la compania de la compania del compania
City	State OH	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Ршроѕе			100 720 000 1
City	State OH	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	State OH	Zip Code	Check Number	