

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full		<u> </u>					
David Young For Judge Committee		•					
To Whom Paid			M	D	Ϋ́	Amount	
T Murray's Bar & Kitchen				10	ı	Minouin	393.15
Address	Purpose	TOTO	1110	TilT	<u> </u>	393.13	
560 S. High	Beverage	ve					
City	State Zip Code Check Number						
Columbus	ОН	Debit					
To Whom Paid	OH	43215	М	DCDI	Y	Amount	
T Murray's Bar & Kitchen				1 0			201.81
Address	Purpose	··	0 0	1 - 10	1 - 1 -	<u> </u>	2.01.01
560 S. High	Foood						
City	State	Zip Code	Check Number				
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City	State	Zip Code	Check N	lumber			
2- 1-a	<u> </u>		<u> </u>				
To Whom Paid		•	M	D	Y	Amount	
All	To To	•					
Address	Purpose						
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City	State	Zip Code	Check N	umber			
To Whom Paid	1		 	В		Amount	
TO WHOM FAIG			M	D	Y	Amoun	
Address	Purpose				1		
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City	State	Zip Code	Check N	umber	1		
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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 \$594.96	<u>Ĺ</u>
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