

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Morehart for Judge									
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	7	2	210.00
Address					Purpose				
City					State		Zip Code		Check Number
									1054
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	8	2	537.50
Address					Purpose				
City					State		Zip Code		Check Number
									1056
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						0	9	1	227.00
Address					Purpose				
City					State		Zip Code		Check Number
									1057
To Whom Paid Expenditures from Form 31-F						M	D	Y	Amount
						1	0	1	204.41
Address					Purpose				
City					State		Zip Code		Check Number
									1064
To Whom Paid						M	D	Y	Amount
Address					Purpose				
City					State		Zip Code		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				
City					State		Zip Code		Check Number