

Event Date	09-12-16
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Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full REELECT JUDGE BROWNE! (RJB)													
To Whom Paid JEFFERSON COUNTRY CLUB						M	D	Y	Amount				
						0	9	1	1	2	1	6	1,530.00
Address 7271 JEFFERSON MEADOWS DR				Purpose GOLF CART/GREENS FEES									
City BLACKLICK				State O H		Zip Code 43004		Check Number 1108					
To Whom Paid THE GOLF SHOP AT JEFFERSON						M	D	Y	Amount				
						0	9	1	1	2	1	6	200.00
Address 7271 JEFFERSON MEADOWS DR				Purpose PRIZES FOR GOLF OUTING									
City BLACKLICK				State O H		Zip Code 43004		Check Number DEBIT CARD					
To Whom Paid KIM BROWNE						M	D	Y	Amount				
						0	9	2	0	1	6	385.90	
Address 1094 CRESWELL DR.				Purpose REIMBURSEMENT FOR PURCHASES ON EX. A: GOLF PRIZE									
City NEW ALBANY				State O H		Zip Code 43054		Check Number 1105					
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					
To Whom Paid						M	D	Y	Amount				
Address				Purpose									
City				State		Zip Code		Check Number					

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 \$	2,115.90
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