

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Glaeden for Judge									
To Whom Paid RediQuik Signs						M	D	Y	Amount 86.47
Address 226 East State Street						Purpose Signs			
City Columbus						State O H		Zip Code 43215	Check Number 1081
To Whom Paid Pinnacle Golf Club						M	D	Y	Amount 2,564.68
Address 1500 Pinnacle Club Drive						Purpose Fundraiser charges			
City Grove City						State O H		Zip Code 43123	Check Number 1090
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
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 \$ 2,651.15