

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full						
Morehart for Judge						
To Whom Paid			М	D	Y	Amount
Janet Grubb			0 9	2 3	1 5	47.99
Address	Purpose					
225 Eastmoor Blvd.	Reimbursement for Food/Drink Costs					
City	State Zip Code			łumber		
Columbus	O ' H	43209	ļ	1009		
To Whom Paid			м	D	Y	Amount
				[
Address	Purpose			-		
City	State	Zip Code	Check N	lumber		
To Whom Paid				D	Y	Amount
			} }			
Address Purpose						
		·	1			
To Whom Paid	'		М	D	Y	Amount *
10 111000 / 1110			1	l i	1 1	
Address Purpose						
;						
To Whom Paid	1 !		м	D	ΙΥ	Amount
TO Whoth I aid				1	1 :	
Address	Purpose					
Address						
	State	Zip Code	Check Number			
City	J.					
To Whom Paid	<u> </u>		М	Î D	ΙΥ	Amount
10 wyour taid				-	1	
Address	Purpose		<u>'</u>	1	1 '	L
Address	T to post					
	State	Zip Code	Check N	Jumber		
City	Siale	Zip Code	Cilcon .	con rumber		
1	<u> </u>	<u> </u>	М	D	ΙΥ	Amount
To Whom Paid			l t	1		
	I Pumose		i	1 1	سنب	<u> </u>
Address	Ршроѕе					
	C	Izi- Codo	Check !	Vimber		
City	State [Zip Code	CHECK	Tallin (C)		
	1 '					

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.