Statement of Expenditures

Page	3

Prescribed by Secretary of State 2/01

Name of Committee in Full CAMPBELL FOR JUDGE			
To Whom Paid PayPal			M D Y Amount \$33.10
Address	Purpose Automatic withdrawal		
City	State OH_	Zip Code	Check Number
To Whom Paid US Bank			1 1 0 8 1 0 Amount \$33.00
Address	Overdraft charge		
City	OH State	Zip Code	Check Number
To Whom Paid Expenditures from for 31-F			1 0 2 1 1 0 Amount \$120.00
Address	Purpose	Tour and	
City	OH,	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	OH_	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	OH State	Zip Code	Check Number
To Whom Paid			M D Y Arroount
Address	Purpose		
City	State OH	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address .	Purpose		
City	State OH	Zīp Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State OH	Zip Code	Check Number