

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

| Name of Committee in Full | | | | | | | |
|--------------------------------------|---|--|--------------|--------|------------------|----------|--------|
| Committee to Andrea Peeples for Judg | e | | 1 1/ | 1 6 | 1 17 | I A | |
| To Whom Paid | | | M | D | Y | Amount | 450.00 |
| The Hawk Galleries | | | | | | 450.00 | |
| Address | Purpose | | | | | | |
| 153 E. Main Street | Location Rental | | | | | | |
| City | State | Zip Code | Check N | | | | |
| COLUMBUS | OH | 43215 | | 1004 | | | |
| To Whom Paid | | | M | D | Y | Amount | 200.00 |
| LEMON GRASS | In | | 0 4 | 1 4 | 0 5 | <u> </u> | 200.00 |
| Address | I - | Purpose | | | | | |
| 641 N HIGH STREET | State | CATERING State Zip Code Check Number | | | | | |
| COLLIMPLIC | 1 1 | Zip Code 43215 | Check I | 1002 |) | | |
| COLUMBUS To Whom Paid | OH | 43213 | M | 1002 | Y | Amount | |
| | | | | 1 . | 1 . | Anount | 119.53 |
| ANDREA PEEPLES Address | Purpose | | 1013 | 1010 | 0 5 | | 119.55 |
| | | | | | | | |
| 5596 WINSOR WOODS DR | REIMBURSEMENT FOR BEVERAGES-The Andersons State Zip Code Check Number | | | | | 5 | |
| City COLUMBUS | 1 1 | 43230 | CHECK | 1007 | , | | |
| To Whom Paid | OH | 43230 | M | 1007 | ΙΥ | Amount | |
| | | | | 0 6 | 1 . | l . | 47.23 |
| Megan Kilgore | Purpose | | 1013 | 0 0 | 10 3 | <u> </u> | 47.20 |
| 685 Kerr Street | PARTY SUPPLIES | | | | | | |
| City | State | Zip Code | Check N | Jumher | | | |
| COLUMBUS | OH | 43215 | | 1011 | | | |
| To Whom Paid | 0 11 | 10210 | M | D | ΙΥ | Amount | |
| | | | | | | | |
| Address | Purpose | | | | | <u> </u> | " |
| 7 tautos | | | | | | | |
| City | State | Zip Code | Check N | Number | | | |
| | | | | | | | |
| To Whom Paid | | | M | D | Y | Amount | |
| | | | | | \mathbf{I}_{1} | | |
| Address | Purpose | | | | . | | |
| | 1 | | | | | | |
| City | State | Zip Code | Check Number | | | | |
| | 1 | 1 | | | | | |
| To Whom Paid | 1 | | M | D | Ÿ | Amount | |
| | | | | | | | |
| Address | Purpose | | | | | I | |
| - mp-o-c | | | | | | | |
| City | State | Zip Code | Check N | Vumber | - | | |
| | | | | | | | |
| | | | | | | | |

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 \$ | 816.76 |
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|---------------|--------|