

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full David Young For Judge Committee									
To Whom Paid Sam's Club						M 0	D 6	Y 2	Amount 290.88
Address 5870 Sawmill Road		Purpose Food/ Beverage/ Party Supplies/ Parade Candy							
City Dublin		State OH	Zip Code 43017		Check Number Debit				
To Whom Paid Lowe's						M 0	D 6	Y 2	Amount 46.20
Address 6555 Dublin Center Drive		Purpose Party Supplies							
City Dublin		State OH	Zip Code 43017		Check Number Debit				
To Whom Paid Lowe's						M 0	D 6	Y 3	Amount 11.98
Address 6555 Dublin Center Drive		Purpose Party Supplies							
City Dublin		State OH	Zip Code 43017		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.