

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full O'Shaughnessy Committee									
To Whom Paid The Jury Room						M	D	Y	Amount
						0	3	2	14
Address 22 E. Mound Street						Purpose Meals			
City Columbus						State O H		Zip Code 43215	
Check Number DC									
To Whom Paid Chase Bank						M	D	Y	Amount
						0	3	3	14
Address PO Box 659754						Purpose bank fees			
City San Antonio						State T X		Zip Code 78265	
Check Number									
To Whom Paid Ohio Ethics Commission						M	D	Y	Amount
						0	4	1	14
Address 30 W. Spring Street						Purpose filing fee			
City Columbus						State O H		Zip Code 43215	
Check Number DC									
To Whom Paid Citizens for Stinziano						M	D	Y	Amount
						0	4	2	14
Address 550 E. Walnut Street						Purpose contribution			
City Columbus						State O H		Zip Code 43215	
Check Number DC									
To Whom Paid Friends of Fitzgerald						M	D	Y	Amount
						0	4	2	15
Address 340 E. Fulton Street						Purpose contribution			
City Columbus						State O H		Zip Code 43215	
Check Number DC									
To Whom Paid Chase Bank						M	D	Y	Amount
						0	4	3	10
Address PO Box 659754						Purpose bank fees			
City San Antonio						State T X		Zip Code 78265	
Check Number									
To Whom Paid Ancient Order of Hibernians						M	D	Y	Amount
						0	5	0	16
Address 274 E. Innis Ave.						Purpose Event sponsorship			
City Columbus						State O H		Zip Code 43207	
Check Number 1073									
To Whom Paid Jane M. O'Shaughnessy						M	D	Y	Amount
						0	5	1	12
Address 280 Fairlawn Dr.						Purpose accounting			
City Columbus						State O H		Zip Code 43214	
Check Number 1074									

Page Total \$ 1,305.76