

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page _____

Name of Committee in Full Citizens for Jason Phillips							
To Whom Paid Heartland Bank				M	D	Y	Amount \$5.00
Address 850 North Hamilton Road				Purpose Dormant Service Charge on Bank Account			
City Gahanna		State OH	Zip Code 43230	Check Number			
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Page Total **\$40.00**