

Statement of Expenditures

Page _____

Prescribed by Secretary of State 2/01

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|---|--|--|--|--|--|-----------------------------------|---|--------------------------|------------------------|
| Name of Committee in Full CITIZENS AGAINST ISSUES 50 and 51 | | | | | | | | | |
| To Whom Paid J P Morgan Chase Bank | | | | | | M | D | Y | Amount 13.25 |
| Address 100 E. Broad St | | | | | | Purpose Bank Fee | | | |
| City Columbus | | | | | | State OH | | Zip Code 43215 | |
| | | | | | | Check Number Electronic | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | |
| | | | | | | Check Number | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | |
| | | | | | | Check Number | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | |
| | | | | | | Check Number | | | |
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| | | | | | | Check Number | | | |