## **Statement of Expenditures**

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Prescribed by Secretary of State 2/01

Manager Commission Full			
Name of Committee in Full Citizens for Bonnie Michael			
To Whom Paid Ohio Ethics Commission		<del></del>	M D Y Amount
Address			0 3 1 7 1 4 \$35.00
William Green Bldg 30 W Spring St	Purpose Financial	Disclosure Filing	Fee
City Columbus	State OH	Zip Code 43215	Check Number 5148
To Whom Paid Postmaster			M D Y Amount 0 3 1 9 1 4 \$13.40
Address Worthington Branch	Purpose Mailing F	inancial Disclosur	e Form
City Worthington	State OH	Zip Code 43085	Check Number 5149
To Whom Paid Bonnie Michael	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	M D Y Amount 0 5 1 0 1 4 \$6.70
Address 231 Saint Antoine St	Purpose Mailing St	upplemental Financ	cial Disclose Form
City Worthington	State OH	Zip Code 43085	Check Number 5150
To Whom Paid Fed X Office			M D Y Amount 0 5 2 5 1 4 \$4.83
Address 940 High St	Purpose Magnets	for Parade Signs	
City Worthington	State OH	Zip Code 43085	Check Number 5151
To Whom Paid	•		M D Y Amount
Address	Purpose		1 , , , , , , , , , , , , , , , , , , ,
City	State OH	Zip Code	Check Number
To Whom Paid	· ·	<u>-</u>	M D Y Amount
Address	Purpose		
City	State OH	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City	State OH	Zip Code	Check Number
To Whom Paid		•	M D Y Amount
Address	Purpose		
City	State OH	Zip Code	Check Number