Statement of Expenditures

Page ____

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Lori M. Tyack					
To Whom Paid TRANSFERRED FROM FORM 31-F			M D Y	Amount \$4,660.08	
Address	Purpose	Purpose			
City	State	Zip Code	Check Number	SANTA CAMPEN	
To Whom Paid TRANSFERRED FROM FORM 31-C			M D Y 1 0	Amount \$2,125.00	
Address	Purpose		<u> </u>	-	
City	State	Zip Code	Check Number		
To Whom Paid Huntington National Bank			M D Y O 8 1 6 1 0	Amount \$20.00	
Address P.O. Box 1558	Purpose Bank Service	e Charge			
City Columbus	State	Zip Code 43216	Check Number		
To Whom Paid Huntington National Bank	· · · · · · · · · · · · · · · · · · ·		M 1 0 1 9 1 0	Amount \$27.95	
Address P.O. Box 1558	Purpose Check Fee				
City Columbus	State	Zip Code 43216	Check Number		
To Whom Paid Huntington National Bank			1 0 1 5 1 0	Amount \$20.00	
Address P.O. Box 1558	Purpose Bank Service	Purpose Bank Service Charge			
City Columbus	State OH	Zip Code 43216	Check Number		
To Whom Paid Huntington National Bank			M 1 1 5 1 0	Amount \$12.00	
Address P.O. Box 1558	Purpose Bank Service	Bank Service Charge			
City Columbus	State OH	Zip Code 43216	Check Number	The state of the s	
To Whom Paid Huntington National Bank			0 9 1 5 1 0	Amount \$20.00	
Address P.O. Box 1558	Purpose Bank Service	Purpose Bank Service Charge			
City Columbus	State	Zip Code 43216	Check Number	A SERIO CONTRACTOR	
To Whom Paid Harold Benny	· <u>'.</u>		M D Y O 1 3 1 1 1	Amount \$125.00	
Address 342 S High Street	Purpose Reimbursem	Purpose Reimbursement for cash contribution over \$100			
City Columbus	State OH	Zip Code 43215	Check Number 313	All Shirts and the fact of the	