

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Adam Slane												
To Whom Paid Chase Bank						M	D	Y	Amount			
						1	2	0	1	0	9	\$25.00
Address 3100 West Broad Street				Purpose Overdraft Fee								
City Columbus				State OH	Zip Code 43204		Check Number					
To Whom Paid Chase Bank						M	D	Y	Amount			
						1	2	0	2	0	9	\$5.00
Address 3100 West Broad Street				Purpose Extended Overdraft Fee								
City Columbus				State OH	Zip Code 43204		Check Number					
To Whom Paid Chase Bank						M	D	Y	Amount			
						1	2	0	3	0	9	\$5.00
Address 3100 West Broad Street				Purpose Extended Overdraft Fee								
City Columbus				State OH	Zip Code 43204		Check Number					
To Whom Paid Chase Bank						M	D	Y	Amount			
						1	2	0	3	0	9	\$5.00
Address 3100 West Broad Street				Purpose								
City Columbus				State OH	Zip Code 43204		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					
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					