

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens Committee for Persons with DD									
To Whom Paid David K. Yeager						M 0	D 1	Y 1	Amount 150.00
Address 3374 Column Drive			Purpose integrated spreadsheet - annual BOE report						
City Columbus			State O	H H	Zip Code 43215	Check Number N/A			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			
To Whom Paid						M 	D 	Y 	Amount
Address			Purpose						
City			State 		Zip Code	Check Number			