

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full FRIENDS OF JEFF CARSON									
To Whom Paid AISCO GAHANNA LLC						M	D	Y	Amount
Address 146 N. HAMILTON RD						10	31	09	213.50
City GAHANNA						State OH		Zip Code 43230	Check Number 1005
To Whom Paid TIM HORTONS						M	D	Y	Amount
Address 365 ANGLER RD						11	01	09	23.47
City GAHANNA						State OH		Zip Code 43230	Check Number VISA 6257
To Whom Paid SEAN McMULLON						M	D	Y	Amount
Address 						01	01	10	220.00
City 						State OH		Zip Code 	Check Number 1003
To Whom Paid JEFF CARSON						M	D	Y	Amount
Address 7481 MORSE RD						03	30	10	336.39
City NEW ALBANY						State OH		Zip Code 43054	Check Number 1006
To Whom Paid 						M	D	Y	Amount
Address 									
City 						State OH		Zip Code 	Check Number
To Whom Paid 						M	D	Y	Amount
Address 									
City 						State OH		Zip Code 	Check Number
To Whom Paid 						M	D	Y	Amount
Address 									
City 						State OH		Zip Code 	Check Number

793.36
~~456.97~~
Page Total **\$0.00**