Statement of Expenditures

	1	
Page		
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Prescribed by Secretary of State 2/01

Name of Committee in Full U.A. Library Levy Campaign			
To Whom Paid Hopkins Printing			M D Y Amount \$864.57
Address P.O. Box 951404	Purpose Brochure Printing		
City Cleveland	State OH	Zip Code 44193	Check Number 1059
To Whom Paid Christine Taylor			1 0 2 0 1 6 \$752.00
Address 1141 Highland Drive	Reimburse	ement - Postage for Abs	entee Chasers
City Columbus	State OH	Zip Code 43221	Check Number 1060
To Whom Paid Christine Taylor			M D Y Amount 1 1 0 5 1 6 \$141.00
Address 1141 Highland Drive	Purpose Reimburse	ment - Postage (300 Firs	t Class Stamps)
City Columbus	State OH	Zip Code 43221	Check Number 1061
Pay Pal Corporate Headquarters			M D Y Amount 1 2 0 9 1 6 \$5.83
Address 2211 North Fist Street		onation Collection Fees T	hrough 12-9-16
City San Jose	CA State	Zip Code 95131	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		**************************************
City	OH,	Zip Code	Check Number
To Whom Paid	<u> </u>		M D Y Amount
Address	Purpose		<u> </u>
City	State	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
To Whom Paid	<u> </u>		M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number