Statement of Expenditures

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Page		

Prescribed by Secretary of State 2/01

Name of Committee in Full COMMITTEE TO ELECT PAUL LEITHAR	₹ T			
To Whom Paid U.S. BANK			0 2 2 8 1 2	Amount \$8.00
Address 166 NORTH HAMILTON ROAD		RVICE CHARGES		
City GAHANNA	State OH	Zip Code 43230	Check Number NONE	in the second of the second
To Whom Paid DENISE A. LEITHART			$\begin{bmatrix} M \\ 0 & 3 & 0 \end{bmatrix} 1 \begin{bmatrix} Y \\ 1 & 2 \end{bmatrix}$	Amount \$709.34
Address 133 MISTY OAK PL.		 	MPAIGN EXPENSES	
City GAHANNA	OH	Zip Code 43230	Check Number 025026688	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	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	Аточит
Address	Purpose			
City	OH ,	Zip Code	Check Number	<u> </u>
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH State	Zip Code	Check Number	2
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	