

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full Preisse Campaign Committee									
To Whom Paid Suzanne Marshall						M	D	Y	Amount \$140.00
						0	1	2	1
Address 260 North Cassady						Purpose Clerical Support			
City Columbus						State OH		Zip Code 43209	
						Check Number 157			
To Whom Paid Franklin County Republican Party						M	D	Y	Amount \$1,250.00
						0	3	0	3
Address 14 E. Gay Street						Purpose Contribution			
City Columbus						State OH		Zip Code 43215	
						Check Number 158			
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			
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			