

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Contributor in Full				M	D	Y	Amount
KENT 4 KIDS				03	06	15	294.26
To Whom Paid							
ALPHA GRAPHICS							
Address							
9015 AMTARES AVE							
City							
Gals							
State							
OH							
Zip Code							
43240							
Check Number							
511							
To Whom Paid							
IMANUEL LARCHER							
Address							
1909 CASE RD							
City							
Gals							
State							
OH							
Zip Code							
43224							
Check Number							
501							
To Whom Paid							
IMANUEL LARCHER							
Address							
1909 CASE RD							
City							
Gals							
State							
OH							
Zip Code							
43224							
Check Number							
510							
To Whom Paid							
DEC							
Address							
FILLING FEE							
City							
Gals							
State							
OH							
Zip Code							
43224							
Check Number							
040815							
To Whom Paid							
STAPLES							
Address							
500 STAPLES DR							
City							
FRAMINGHAM							
State							
MA							
Zip Code							
01702							
Check Number							
537							
To Whom Paid							
STAPLES							
Address							
500 STAPLES DR.							
City							
FRAMINGHAM							
State							
MA							
Zip Code							
01702							
Check Number							
513							
To Whom Paid							
IMANUEL LARCHER							
Address							
1909 CASE RD							
City							
Gals							
State							
OH							
Zip Code							
43224							
Check Number							
540							
To Whom Paid							
ALPHA GRAPHICS							
Address							
9015 AMTARES AVE							
City							
Gals							
State							
OH							
Zip Code							
43240							
Check Number							
539							