31-B R.C. 3517.10

FOR PAPER FILING ONLY

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full				 					
Citizens for David DeCpaua				1					
To Whom Paid				 	м	D	Y	Amount	
Arlington Bank				•		1 0	1 2	, anount	3.00
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2130 Tremont Center	Service Charge		narge						
City	State		Zip Code	-	Check N	lumber			
Columbus	0 1			43221	b	ank del	oit		
To Whom Paid	;				M	D	Y	Amount	
Herb Gillen Agency					0 1	2 1	1 2		68.86
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Columbus	0	H	l	43221		139			
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Herb Gillen Agency	1.				0 7	2 9	1 2	L	22.99
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To Whom Paid				1	M _i	D _i	Y :	Amount	
N. J.	Inumana]				<u> </u>	_
Address	Purpose			1					
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Page Total \$	94.85