Statement of Expenditures

Page 8

Prescribed by Secretary of State 2/01

Name of Committee in Full				
GIBBS 4 KIDS COMMITTEE				
TO Whom Paid OTG DCA NENTURE			DGIGIL	Amount
Address	Purpose		061616	2.43
C.	MEALS			
City	State	Zip Code	Check Number DEBIT	
To Whom Paid			M D Y	Amount
DFFICEMAX Address Purpose			061616	ì.
	Suppl.	IES		
City	State	Zip Code	Check Number	
Columbus To Whom Paid	DH		DEBIT	
OSU CAMPUS PARLING			061616	5.75
Address	Purpose 17. CV			1 3.73
City	State	Zip Code		
Columbus	DH	ap code	Check Number DEBIT	
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			Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	. : .
To Whom Paid			M D Y	Amount
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City	State	Zip Code	Check Number	•••
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Address	Purpose			
City	State	Zip Code	Check Number	• • •
To Whom Paid			M D Y	Amount
Address	Purpose			
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City	State	Zip Code	Check Number	
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