

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends for Weiss									
To Whom Paid I Know I Can						M 1	D 0	Y 2	Amount 500.00
Address 603 East Town Street			Purpose Charitable Donation						
City Columbus			State O	H H	Zip Code 43215	Check Number 508			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			
To Whom Paid						M 1	D 0	Y 2	Amount
Address			Purpose						
City			State		Zip Code	Check Number			