

## Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Natalie West - Nicodemus for Fiscal Officer</b>									
To Whom Paid <b>First Service Federal Credit Union</b>						M	D	Y	Amount <b>20.00</b>
Address <b>160 Main St</b>						Purpose <b>check fee</b>			
City <b>Groveport</b>						State <b>OH</b>	Zip Code <b>43125</b>	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	
To Whom Paid						M	D	Y	Amount
Address						Purpose			
City						State	Zip Code	Check Number	