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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Friends of Michele Elliott			
To Whom Paid		M D Y Amount	
Huntington National Bank Address	Purpose	0 1 1 5 1 6 3.0	U
17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216	Check Number	
To Whom Paid	1 () 111 43210	M D Y Amount	
Huntington National Bank		0 2 1 6 1 6 3.0	n
Address	Purpose	0 2 1 0 1 0 5.0	_
17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216		
To Whom Paid		M D Y Amount	_
Huntington National Bank		0 3 1 5 1 6 3.0	0
Address	Purpose		
17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216		
To Whom Paid		M D Y Amount	
Huntington National Bank Address		0 4 1 5 1 6 3.0	<u>U</u>
	Purpose		
17 South High Street	statement charge		
City Columbus	State Zip Code OH 43216	Check Number	
To Whom Paid	1 () 11 1 43210	M D Y Amount	
Huntington National Bank		0 5 1 6 1 6 3.0	n
Address	Purpose	10 3 1 0 1 0 3.0	<u>U</u>
17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216		
To Whom Paid	1.0	M D Y Amount	_
Huntington National Bank		0 6 1 5 1 6 3.0	0
Address	Purpose		
17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216		
To Whom Paid		M D Y Amount	_
Huntington National Bank		0 7 1 5 1 6 3.0	<u>0</u>
Address	Purpose		
I 17 South High Street	statement charge		
City	State Zip Code	Check Number	
Columbus	O H 43216	M D V Amount	
To Whom Paid Huntington National Bank		M D Y Amount 0 7 3 1 1 6 5.0	n
Address	Purpose	0]/[3 1]1 0] 3.0	<u></u>
17 South High Street	dormant account fee		
City	State Zip Code	Check Number	
Columbus	O H 43216		

Page Total \$	26.00
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