

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Muncman for Grove City Council</i>					
To Whom Paid <i>Columbus Messenger</i>		M <i>10</i>	D <i>30</i>	Y <i>15</i>	Amount <i>174.00</i>
Address <i>3570 Sullivent Ave</i>		Purpose <i>Advertising</i>			
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43204</i>	Check Number <i>Debit</i>		
To Whom Paid <i>Grove City Finance</i>		M <i>10</i>	D <i>31</i>	Y <i>15</i>	Amount <i>5.39</i>
Address <i>2082 Stringtown Rd.</i>		Purpose <i>Postage</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number <i>Debit</i>		
To Whom Paid <i>Julie Landis - Blesser - Highly Flavored</i>		M <i>11</i>	D <i>03</i>	Y <i>15</i>	Amount <i>45.00</i>
Address <i>4530 Grand Strand Dr.</i>		Purpose <i>Expenditure from 31-F Cupcakes for Social</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number <i>1105</i>		
To Whom Paid <i>Kroger Expenditure from 31-F</i>		M <i>11</i>	D <i>03</i>	Y <i>15</i>	Amount <i>13.00</i>
Address <i>2474 Stringtown Rd.</i>		Purpose <i>Ice for Social</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number <i>Debit</i>		
To Whom Paid <i>Kroger Expenditure from 31-F</i>		M <i>11</i>	D <i>03</i>	Y <i>15</i>	Amount <i>135.62</i>
Address <i>5965 Hoover Rd.</i>		Purpose <i>Paper Products / Food for Social</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number		
To Whom Paid <i>Grand Strand Pizzeria Expenditure from 31-F</i>		M <i>11</i>	D <i>03</i>	Y <i>15</i>	Amount <i>76.45</i>
Address <i>4034 Broadway</i>		Purpose <i>Food for Social</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number <i>Debit</i>		
To Whom Paid <i>Patricia A. Muncman Expenditure from 31-F</i>		M <i>12</i>	D <i>03</i>	Y <i>15</i>	Amount <i>143.38</i>
Address <i>4717 Nicholas Pointe Dr</i>		Purpose <i>Reimbursement for Food/Drinks for Social</i>			
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number <i>12487 CASHIER CHECK</i>		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State	Zip Code	Check Number		