

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 3

| | | | | | | | | | |
|--|--|--|--|--|--|---|---|--------------------------|-----------------------------|
| Name of Committee in Full Committee 4 Children | | | | | | | | | |
| To Whom Paid Browning Design | | | | | | M | D | Y | Amount \$2,908.00 |
| Address 335 Wilber Avenue | | | | | | Purpose Professional Services | | | |
| City Columbus | | | | | | State OH | | Zip Code 43215 | Check Number 2417 |
| To Whom Paid Jill Frost | | | | | | M | D | Y | Amount \$750.00 |
| Address 42 Latta Avenue | | | | | | Purpose Professional Services | | | |
| City Columbus | | | | | | State OH | | Zip Code 43205 | Check Number 2418 |
| To Whom Paid Metro Cuisine | | | | | | M | D | Y | Amount \$868.50 |
| Address 6185 Huntley Rd, Suite C | | | | | | Purpose Fundraising Expense | | | |
| City Columbus | | | | | | State OH | | Zip Code 43229 | Check Number 2419 |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |

Page Total **\$4,526.50**