

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Community Partnership For Education</b>					
To Whom Paid <b>Ohio Attorney General</b>		M <b>0</b>	D <b>4</b>	Y <b>2 1 0 9</b>	Amount <b>\$200.00</b>
Address <b>150 East Gay Street</b>		Purpose <b>Report Filing</b>			
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>		Check Number <b>Online</b>	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <b>OH</b>	Zip Code		Check Number	