Statement of Expenditures

Page _____

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo						
To Whom Paid Franklin County Republican Party			м 1 2	D 2 1	ү 0 9	Amount \$75.00
Address 14 E Gay St	Purpose Ticket-Victory Dinner					
City Columbus	State OH	Zip Code 43215	Check N 1043	umber		
To Whom Paid Gene Pierce			м 1 2	D 2 3	ү 0 9	Amount \$41.08
Address 1063 Perry St	Purpose Reimbursement-Campaign Meeting Expenses					
City Columbus	State OH	Zip Code 43201	Check N 1003	***************************************		
To Whom Paid New Century Solutions			M D Y Amount 1 2 3 0 0 9 \$3,000.00			Amount \$3,000.00
Address 2931 E Dublin Granville Rd	Purpose Consulting					
City Columbus	State OH	Zip Code 43229	Check Number 1004			
To Whom Paid The Clarmont			м 1 2	3 O	У 0 9	Amount \$21 .89
Address 684 S High St	Campaign Meeting Expenses					
City Columbus	State OH	Zip Code 43215	Check Number Debit Card			
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City	OH State	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check Number			ALIANA PROJECT
To Whom Paid			М	D	Y	Amount
Address	Purpose		•		***************************************	
City	State OH	Zip Code	Check N	Number		