Statement of Expenditures

Page 2

Prescribed by Secretary of State 2/01

Name of Committee in Full Families for Campbell			
To Whom Paid Kroger			M D Y Amount 1 0 2 8 1 3 \$138.00
Address 300 South Hamilton Road	Purpose Stamps		
City Gahanna	State OH	Zip Code 43230	Check Number Debit Card
To Whom Paid Rocky Fork Printing			M D Y Amount \$10 2 1 1 3 \$107.82
Address 165 Granville Street	Purpose Campaigi		
City Gahanna	OH State	Zip Code 43230	Check Number Debit Card
To Whom Paid Rocky Fork Printing			M D Y Amount \$207.10
Address 165 Granville Street	Purpose Campaigr		
City Gahanna	OH	Zip Code 43230	Check Number Debit Card
To Whom Paid Rocky Fork Printing			M D Y Amount 1 1 3 \$373.63
Address 165 Granville Street	Purpose Campaigr		
City Gahanna	OH	Zip Code 43230	Check Number Debit Card
To Whom Paid Matthew Campbell			M D Y Amount 1 3 \$154.64
Address 366 Imperial Drive			expenditures on his credit card.
City Gahanna	OH State	Zip Code 43230	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Check Number