

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Lori Tyack													
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	5	1	5	0	7	20.00
Address P. O. Box 1558				Purpose Monthly Service Fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	5	1	5	0	7	5.00
Address P. O. Box 1558				Purpose Checks returned statement fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	6	1	5	0	7	20.00
Address P. O. Box 1558				Purpose Monthly Service Fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	6	1	5	0	7	5.00
Address P. O. Box 1558				Purpose Checks returned statement fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	7	1	6	0	7	20.00
Address P. O. Box 1558				Purpose Monthly Service Fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Huntington National Bank							M	D	Y	Amount			
							0	7	1	6	0	7	5.00
Address P. O. Box 1558				Purpose Checks returned statement fee									
City Columbus				State O H		Zip Code 43216		Check Number					
To Whom Paid Friends for Ginther							M	D	Y	Amount			
							0	3	2	0	0	7	250.00
Address 405 East Town Street				Purpose Campaign Contribution									
City Columbus				State O H		Zip Code 43215		Check Number 206					
To Whom Paid Ohio Ethics Commission							M	D	Y	Amount			
							0	3	2	6	0	7	40.00
Address 8 E. Long Street, 10th floor				Purpose Filing of Ethics Form									
City Columbus				State O H		Zip Code 43215		Check Number 207					