

# 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>Hilliard City School District</b>						M 1	D 2	Y 1	Amount <b>480.00</b>
Address <b>5323 Cemetery Rd</b>		Purpose <b>Lit drop printing</b>							
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Check Number <b>1024</b>						
To Whom Paid <b>Bobbi Mueller</b>						M 1	D 2	Y 1	Amount <b>35.00</b>
Address <b>5248 Windsock Ct.</b>		Purpose <b>Old Hilliardfest Fee</b>							
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Check Number <b>1023</b>						
To Whom Paid <b>Avakian Consulting</b>						M 1	D 4	Y 1	Amount <b>10,000.00</b>
Address <b>1215 Polaris Parkway, Suite 114</b>		Purpose <b>Communication Services</b>							
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43240</b>	Check Number <b>1022</b>						
To Whom Paid <b>Huntington National Bank</b>						M 1	D 5	Y 1	Amount <b>2.50</b>
Address <b>PO Box 1588 EA1W37</b>		Purpose <b>Fee</b>							
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43216</b>	Check Number <b>electronic</b>						
To Whom Paid <b>Pay Pal</b>						M 1	D 8	Y 1	Amount <b>3.97</b>
Address <b>www.paypal.com</b>		Purpose <b>Credit Card Service Fee</b>							
City	State	Zip Code	Check Number <b>electronic</b>						
To Whom Paid						M :	D :	Y :	Amount <b>0.00</b>
Address		Purpose							
City	State	Zip Code	Check Number						
To Whom Paid						M :	D :	Y :	Amount <b>0.00</b>
Address		Purpose							
City	State	Zip Code	Check Number						
To Whom Paid						M :	D :	Y :	Amount <b>0.00</b>
Address		Purpose							
City	State	Zip Code	Check Number						