

Statement of Expenditures

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of ADAMH										
To Whom Paid SEE ATTACHED DETAIL							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				
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				
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				