

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Mildred Johnson												
To Whom Paid SignRocket						M	D	Y	Amount			
						0	9	2	2	1	7	375.00
Address 340 Broadway Ave				Purpose Printing								
City St. Paul		State M N		Zip Code 55071		Check Number DC						
To Whom Paid Mallory Murphy Law, LLC						M	D	Y	Amount			
						1	0	0	2	1	7	50.00
Address 4100 Regent St, Ste A				Purpose Legal Services								
City Columbus		State O H		Zip Code 43219		Check Number 1010						
To Whom Paid Mallory Murphy Law, LLC						M	D	Y	Amount			
						1	0	1	8	1	7	50.00
Address 4100 Regent St, Ste A				Purpose Legal Services								
City Columbus		State O H		Zip Code 43219		Check Number 1011						
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						