## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full			<del></del>	
Teater for Schools				
To Whom Paid			M D Y Amount	
Fifth Third Bank			0 1 1 2 1 2	8.00
Address	Purpose			
21 E. State Street	Service charge			
City	State Zip Code		Check Number	
Columbus	OH	43215		
To Whom Paid			M D Y Amount	
Fifth Third Bank			0 2 1 0 1 2	3.00
Address	Purpose	1		
21 E. State Street	Service charge			
City	State Zip Code		Check Number	
Columbus	O H	43215		•
To Whom Paid		1	M D Y Amount 0 3 1 2 1 2	2.00
Fifth Third Bank	In		0 3 1 2 1 2	3.00
Address Characteristics	Purpose	1		
21 E. State Street	Service charge State Zip Code		Check Number	
•	O H	43215	Check Number	
Columbus To Whom Paid	ОП	43213	M D Y Amount	
Fifth Third Bank		1	0 4 0 1 1 2	3.00
Address	Purpose		[0]4[0]1[1]2	3.00
21 E. State Street	Service charge			
City	State Zip Code		Check Number	
Columbus	ОІН	43215		
To Whom Paid	10111	10210	M D Y Amount	
Fifth Third Bank		1	0 5 0 1 1 2	3.00
Address	Purpose			-
21 E. State Street	Service charge			
City	State Zip Code		Check Number	
Columbus	O   H	43215		
To Whom Paid		:	M D Y Amount	
Fifth Third Bank			0 6 1 2 1 2	3.00
Address	Purpose			
21 E. State Street	Service charge			
City	State Zip Code	1	Check Number	
Columbus	OH	43215		
To Whom Paid			M D Y Amount	
Address	Purpose			
City	State Zip Code		Check Number	
To Whom Paid			M D Y Amount	
	In			
Address	Purpose	1		
Cir.	State Tie Code		Check Number	
City	State Zip Code	1	Check Pullion	
SNOITOSIS TO UNAUE		-	1	
FRANKLIN COUNTY		1		
2012 DEC 17 AM 11: 34			Page Total S	23.00
In tituth for and area		1	· · · · · · · · · · · · · · · · · · ·	<del></del>