31-B
R.C. 3517.10

Page 6

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full: Citizens for Alicia Healy								
To Whom Paid: Columbus Piave Club - John Contino					M: 10	D: 05	Y: 09	Amount: 25.00
Address: P.O. Box 580	Purpose: Columbus Day Parade							
City: New Albany.	State: OH	Zip Code: 43054	Check Number: 1012					
To Whom Paid: Marathon					M: 10	D: 06	Y: 09	Amount: 25.00
Address: 1001 Alum Creek	Purpose: Gas Campaign							
City: Columbus	State: OH	Zip Code: 43209	Check Number: MC Debit					
To Whom Paid: Certified #192					M: 10	D: 09	Y: 09	Amount: 50.00
Address: 1535 Alum Creek	Purpose: Gas							
City: Columbus	State: OH	Zip Code: 43209	Check Number: Cash					
To Whom Paid: Spot Free Car Wash					M: 10	D: 11	Y: 09	Amount: 7.00
Address: 1940 E. ~~Nelson Rd.~~ Main St.	Purpose: Car wash							
City: Columbus	State: OH	Zip Code: 43205	Check Number: MC Debit					
To Whom Paid: Certified Oil					M: 10	D: 14	Y: 09	Amount: 55.01
Address: 1950 Lockbourne	Purpose: Gas							
City: Columbus	State: OH	Zip Code: 43207	Check Number: Debit MC					
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					

Page Total $ ~~0.00~~ $162.01