

# FOR PAPER FILING ONLY

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Hilliard Area Democratic Club</b>										
To Whom Paid <b>US Bank</b>				M <b>0</b>	D <b>7</b>	Y <b>3</b>	Y <b>0</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid <b>US Bank</b>				M <b>0</b>	D <b>8</b>	Y <b>3</b>	Y <b>1</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid <b>US Bank</b>				M <b>0</b>	D <b>9</b>	Y <b>3</b>	Y <b>0</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid <b>US Bank</b>				M <b>1</b>	D <b>0</b>	Y <b>2</b>	Y <b>9</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid <b>US Bank</b>				M <b>1</b>	D <b>1</b>	Y <b>3</b>	Y <b>0</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid <b>US Bank</b>				M <b>1</b>	D <b>2</b>	Y <b>3</b>	Y <b>1</b>	Y <b>1</b>	Y <b>0</b>	Amount <b>5.00</b>
Address <b>4656 Cemetery Road</b>		Purpose <b>Dormant Service Charge</b>								
City <b>Hilliard</b>		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code <b>43026</b>		Check Number <b>N/A</b>					
To Whom Paid				M	D	Y	Y	Y	Y	Amount
Address		Purpose								
City		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code		Check Number					
To Whom Paid				M	D	Y	Y	Y	Y	Amount
Address		Purpose								
City		State <b>OH</b> <input checked="" type="checkbox"/>	Zip Code		Check Number					