

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full FRIENDS OF RAMONA REYES									
To Whom Paid FIREBALL PRESS						M	D	Y	Amount
Address 27 E. 5TH AVE						Purpose HOTCARDS + CAR MAGNETS			
City COLUMBUS						State OH		Zip Code	Check Number N/A (CA)
To Whom Paid DAN TREVAS						M	D	Y	Amount
Address 216 S. JAMES RD						Purpose CONSULTING SERVICES (CAMPAIGN)			
City COLUMBUS						State OH		Zip Code 43213	Check Number N/A (CA)
To Whom Paid DAN TREVAS						M	D	Y	Amount
Address 216 S. JAMES RD						Purpose CONSULTING SERVICES (CAMPAIGN)			
City COLUMBUS						State OH		Zip Code 43213	Check Number
To Whom Paid EXPENDITURES FROM FORM 31-F						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

Page Total \$

836.75 *MF*
992.15