Statement of Expenditures

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Page		

Prescribed by Secretary of State 2/01

Name of Committee in Full Hilliard Area Republican Club Political Actio	n Committe	е			
To Whom Paid Fifth Thrid Bank				M D Y Amount \$2.00	
P. O. Box 630900	Purpose Bank charge				
City Cincinnati	State OH		Code 526 3	Check Number n/a	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	State OH	Zip	Code	Check Number	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	State OH	Zip	Code	Check Number	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	State OH,	Zip	Code	Check Number	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	OH State	Zip	Code	Check Number	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	State OH	Zip	Code	Check Number	
To Whom Paid			M D Y Amount		
Address	Purpose		****		
City	State OH	Zip	Code	Check Number	
To Whom Paid				M D Y Amount	
Address	Purpose				
City	State OH	Zip	Code	Check Number	