

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full <b>KEEP HILLIARD BEAUTIFUL</b>										
To Whom Paid <b>STRIPE CREDIT CARD PROCESSING</b>							M	D	Y	Amount <b>\$7.78</b>
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State <b>OH</b>	Zip Code		Check Number			