31-B				
R.C. 3517,10				

Page	1

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Friends of Amy Harkins							
To Whom Paid			M D Y	Amount			
Yes We Can			0 1 3 1 1 8	547.21			
Address	Purpose		<u> </u>				
370 E Morrill Ave	Payment to	owards support staff					
City	Payment towards support staff State Zip Code Check Number						
Columbus	ОН	43207	107				
To Whom Paid		13207	M D Y	Amount			
l							
Merisa K. Bowers Address	Purpose		0 1 3 1 1 8	95.00			
	-						
400 S. Fifth Street, Suite 101	treasurer se	Zip Code	Check Number				
	State						
Columbus	O H	43215	106				
To Whom Paid			M D Y	Amount			
Merisa K. Bowers				5.00			
Address	Purpose						
400 S. 5th Street, Suite 101	treasurer services						
City	State	Zip Code	Check Number				
Columbus	OH	43215	cash				
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			
				L			
Address	Purpose						
City	State	Zip Code	Check Number				
		J					
To Whom Paid			M D Y	Amount			
Address	Purpose						
City	State	Zip Code	Check Number				
							
To Whom Paid			M D Y	Amount			
				L			
Address	Purpose						
City	State	Zip Code	Check Number				
<u></u>			L				

Page Total \$ 647.21	
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