

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full McClelland for School Board										
To Whom Paid Huntington National Bank							M	D	Y	Amount 6.00
Address 41 South High Street			Purpose Check Fee (Svc. Fee)							
City Columbus			State OH		Zip Code 43207		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			
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 \$ 6.00