

# Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full <b>IMMIGRANT CITIZENS OF OHIO-PAC</b>									
To Whom Paid <b>USPS</b>						M	D	Y	Amount
						0	2	2	\$4.05
Address				Purpose <b>Stamps for mailing</b>					
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		

Page Total **\$4.05**