## **Statement of Expenditures**



Prescribed by Secretary of State 2.01

Name of Committee in Full  AMDON, Edy					
Kenay Madison			/23	1/3	123,33
130 E. Main ST	Camp	tant			
Columbus	Oh	43215	CASHIER	SAN	
To Whom Paid			M D	, Y	Amount
Address	Purpose				
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