

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Mindy Garverick for School Board</b>												
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	1	3	0	9	15.00	
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Bank Fees</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	2	2	7	0	9	5.00
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Dormancy Fee</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	3	3	1	0	9	5.00
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Dormancy Fee</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	4	3	0	0	9	5.00
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Dormancy Fee</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	5	2	9	0	9	5.00
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Dormancy Fee</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
To Whom Paid <b>Heartland Bank</b>						M	D	Y	Amount			
						0	6	3	0	0	9	5.00
Address <b>2365 Old Stringtown Road</b>			Purpose <b>Dormancy Fee</b>									
City <b>Grove City</b>			State <b>O</b>	H	Zip Code <b>43123</b>	Check Number <b>Auto Transfer</b>						
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						