

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full Motil for City Council											
To Whom Paid Huntington National Bank							M	D	Y	Amount	
							1	2	3	4	\$27.50
Address P.O. Box 1558				Purpose Bank fees							
City Columbus				State OH	Zip Code 43216		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City				State OH	Zip Code		Check Number				

Page Total **\$27.50**