

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for a Strong Gahanna									
To Whom Paid Hot Cards						M	D	Y	Amount
						0	2	2	106.75
Address 27 E 5th Ave			Purpose Printing						
City Columbus			State O H		Zip Code 43201		Check Number DC		
To Whom Paid Hot Cards						M	D	Y	Amount
						0	3	0	384.30
Address 27 E 5th Ave			Purpose Printing						
City Columbus			State O H		Zip Code 43201		Check Number DC		
To Whom Paid Hot Cards						M	D	Y	Amount
						0	3	2	362.95
Address 27 E 5th Ave			Purpose Printing						
City Columbus			State O H		Zip Code 43201		Check Number DC		
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		