

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Citizens for Mingo</b>							
To Whom Paid <b>Expenditures From Form 31-F</b>				M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$135.02</b>
Address		Purpose <b>10/8 Event Expenses</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				
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

135.02