

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full CITIZENS FOR TOM BAKER												
To Whom Paid POSTMASTER						M	D	Y	Amount			
						0	4	2	4	1	7	\$490.00
Address LEAP ROAD				Purpose POSTAGE STAMPS								
City HILLIARD				State OH		Zip Code 43026		Check Number 1007				
To Whom Paid PAUL LAMBERT						M	D	Y	Amount			
						0	5	0	8	1	7	\$104.70
Address 4697 PRESTIGE LANE				Purpose FACEBOOK POSTING								
City HILLIARD				State OH		Zip Code 43026		Check Number 1008				
To Whom Paid FIFTH THIRD BANK						M	D	Y	Amount			
						0	5	3	1	1	7	\$22.00
Address PO BOX 630900				Purpose SERVICE CHARGES								
City CINCINNATI				State OH		Zip Code 45263		Check Number NA				
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
				OH								
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
				OH								
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
				OH								
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
				OH								
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City				State		Zip Code		Check Number				
				OH								

Page Total **\$616.70**