

Statement of Expenditures

Page 1

Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|---|--|--|---|--------------------------|--|---------------------------|---|---|---|
| Name of Committee in Full The Committee to Elect Eddie Pfau | | | | | | | | | |
| To Whom Paid Heartland Bank | | | | | | M | D | Y | Amount 012916 10⁰⁰ |
| Address 67 N Stygler Rd | | | Purpose Dormancy/Inactivity Fee | | | | | | |
| City Gahanna | | | State OH | Zip Code 43230 | | Check Number NA | | | |
| 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 | | | |