

Statement of Expenditures

Page _____

Prescribed by Secretary of State 2/01

Name of Committee in Full Vote Barrett							
To Whom Paid Scott Barrett				M 0	D 7	Y 2	Amount \$199.83
Address 1028 Tiffany		Purpose Partial reimbursement					
City Reynoldsburg		State OH	Zip Code 43068	Check Number 145399			
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 **\$199.83**