31-B R.C. 3517.10

FOR PAPER FILING ONLY

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full					
Friends of Amy Harkins					
To Whom Paid			M D Y	Amount	
Will Petrik for Columbus	T .		1 0 1 7 1 7	2,625.00	
Address	Purpose				
2221 Myrtle Ave		nailers share	To the second		
City	State	Zip Code	Check Number		
Columbus	ОН	43211	102		
To Whom Paid			M D Y	Amount	
Merisa K. Bowers Address	Lo		0 9 2 1 1 7	105.00	
	Purpose				
400 S Fifth Street, Suite 101	loan reimbursement				
	State	Zip Code	Check Number		
Columbus	ОН	43215	101		
To Whom Paid M D Y Amount					
Merisa K. Bowers	1.		0 9 2 1 1 7	300.00	
Address	Purpose				
400 S. Fifth Street, Suite 101	treasurer services				
	State	Zip Code	Check Number		
Columbus To Whom Paid	ОН	43215	101		
			M D Y	Amount	
Kemba Financial Credit Union Address	I p		0 7 3 1 1 7	10.00	
	Purpose				
555 Officenter Place/PO Box 307370 City	bank fee State Zip Code Check Number				
	l : :				
Gahanna To Whom Paid	ОН	43230	ACH	Amount	
Kemba Financial Credit Union Address	Dunnaga		0 8 3 1 1 7	10.00	
	Purpose				
555 Officenter Place/PO Box 307370	bank fee State Zip Code Check Number				
	ОН	43230			
Gahanna To Whom Paid	0 11	1 43230	ACH	Amount	
10 Wholi Fard				Amount	
Address	Purpose				
City	State	Zip Code	Check Number		
To Whom Paid		•	M D Y	Amount	
Address	Purpose				
	ļ				
City	State	Zip Code	Check Number		
Ta Wilson Daid			MI I bi I vi	Amount	
To Whom Paid M D Y Amount					
Address	Purpose			J.,	
City	State	Zip Code	Check Number		
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Page Total \$ ____3,050.00