Page	1_

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full				
Friends of Dr. Anahi Ortiz				
To Whom Paid			M D Y	Amount
Dempsev's Address			0 3 2 6 1 5	361.60
	1	Purpose		
346 S. High Street City	Fundrai		In its	
	State	Zip Code	Check Number	
Columbus To Whom Paid	OH	43215	Debit Card	
Friends of Dan Ramos			M D Y	Amount
Address	Purpose	· · · · · · · · · · · · · · · · · · ·	0 6 1 0 1 5	100.00
1828 West 38th Street	L ·			
City	State	Campaign Contribution State Zip Code Check Number		
Lorain	O I H	44053	160	
To Whom Paid	[() ; 11	1 44000	M D Y	Amount
Heartland Bank			$\begin{bmatrix} 0 & 3 & 3 & 1 & 1 & 1 & 5 \\ 0 & 3 & 3 & 1 & 1 & 1 & 5 \end{bmatrix}$	•
Address	Purpose		0131311113	21./3
850 N. Hamilton Road	, .	Checking Account fees		
City	State	Zip Code	Check Number	
Gahanna	OTH	43230	Acct. Debit	
To Whom Paid	1 (1 1 1	132,00	M D Y	Amount
				,
Address	Purpose			<u>.L</u>
	1			
City	State	Zip Code	Check Number	
•	1			A
To Whom Paid			M D Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
				1
Address	Purpose		•	
City	State	Zip Code	Check Number	
	<u> </u>			
To Whom Paid			MDY	Amount
				<u></u>
Address	Purpose			
		1		
City	State	Zip Code	Check Number	•
		<u></u>	V 1 5 1 7	
To Whom Paid			MDY	Amount
A J J L L L L L L L L L L L L L L L L L	Duenoes			<u> 1 </u>
Address	Purpose			
City	State	Zip Code	Check Number	1
Cuy	1	in the same	Check Humber	
<u> </u>	1 1			

Page Total \$	483,35
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