

# Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full <b>Citizens For Good Government</b>											
To Whom Paid <b>Fifth Third Bank</b>						M	D	Y	Amount <b>\$4.00</b>		
						1	2	1	0	0	9
Address <b>5161 Hampsted Village Center Way</b>				Purpose <b>Banking Service Fees</b>							
City <b>New Albany</b>				State <b>OH</b>		Zip Code <b>43054</b>		Check Number			
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	
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Address						Purpose					
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Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City						State <b>OH</b>		Zip Code		Check Number	

Page Total **\$4.00**