## **Statement of Expenditures**



Prescribed by Secretary of State 2/01

Name of Committee in Full Paley for columbus						
To Whom Paid Expenditures from Form 31-F			м 0 2	D 1 9	У 0 9	Amount \$421.88
Address	Purpose			1. 3		
City	State OH	Zip Code	Check N	lumber		
To Whom Paid Expenditures from Form 31-F			м 0 5	D 1 4	o 9	Amount \$155.34
Address	Purpose					
City	State OH	Zip Code	Check N			
To Whom Paid In-Kind contribution			м 0 6	D 2 4	Y 0 9	Amount \$0.00
Address	Purpose		<i>v</i>		- t	<b>4</b>
City	State OH	Zip Code	Check N	lumber		
To Whom Paid Expenditures from Form 31-F			м 0 7	D 2 3	0 9	Amount <b>\$723.98</b>
Address	Purpose		B	1		
City	State OH	Zip Code	Check N	Number		
To Whom Paid Expenditures from Form 31-F			м 0 9	D 1 0	0 9	Amount \$114.05
Address	Purpose		8	ı	5	
City	State OH	Zip Code	Check Number			
To Whom Paid Expenditures from Form 31-F			м 1 0	D 0 8	0 9	Amount \$146.75
Address	Purpose		5	1		
City	State OH	Zip Code	Check Number			
Tu Whom Puid			N/	D	T V	Amount
Address	Purpose				.t	<u> </u>
City	State OH	Zip Code	Check N	Number		
To Whom Paid			М	D	Ý	Amount
Address	i <sup>2</sup> arpose	allen Sc. 7 cylum selven 10,5 m. Star olim gd. ymg amfylgar aith roeffed ddir o'd fell o'd ffyn Ffyrif Ffir i fell o'd f	·#	.k		
City	State OH	Zip Code	Check N	lumber		