

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 2

Name of Committee in Full <b>Friends of Nick Amicucci</b>									
To Whom Paid <b>American Legion</b>						M	D	Y	Amount
						0	1	1	7
Address <b>3363 McDowell Rd.</b>						Purpose <b>Donation</b>			
City <b>Grove City</b>						State <b>OH</b>	Zip Code <b>43123</b>		Check Number <b>192529</b>
To Whom Paid <b>Board of Election</b>						M	D	Y	Amount
						0	8	0	4
Address <b>1700 Morse Road</b>						Purpose <b>Filing Fee</b>			
City <b>Columbus</b>						State <b>OH</b>	Zip Code <b>43229</b>		Check Number <b>Cash</b>
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
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

Page Total **\$222.57**