

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 7

Name of Committee in Full Friends of Tina Pierce							
To Whom Paid Huntington National Bank				M 1	D 1	Y 1	Amount \$25.00
Address PO Box 1558 EA1W37		Purpose Extended overdraft fee					
City Columbus	State OH	Zip Code 43216	Check Number				
To Whom Paid Huntington National Bank				M 1	D 1	Y 1	Amount \$2.50
Address PO Box 1558 EA1W37		Purpose Statement charge					
City Columbus	State OH	Zip Code 43216	Check Number				
To Whom Paid Huntington National Bank				M 1	D 2	Y 1	Amount \$25.00
Address PO Box 1558 EA1W37		Purpose Overdraft fee					
City Columbus	State OH	Zip Code 43216	Check Number				
To Whom Paid Huntington National Bank				M 1	D 2	Y 1	Amount \$25.00
Address PO Box 1558 EA1W37		Purpose Extended overdraft fee					
City Columbus	State OH	Zip Code 43216	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State OH	Zip Code	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State OH	Zip Code	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State OH	Zip Code	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State OH	Zip Code	Check Number				

Page Total **\$77.50**