31-B
R.C. 3517.10

Statement of Expenditures

Prescribed by Secretary of State 8/95

Name of Committee in Full
COMMUNITY PARTNERSHIP FOR EDUCATION

To Whom Paid	Address	City	State	Zip Code	Purpose	Category Code*	M	D	Y	Amount
POST MASTER	LEAP ROAD	HILLIARD	OH	43026	POSTAGE		10	14	08	$ 420.00
COMPLETE CAMPAIGNS.COM	3635 RUFFIN ROAD	SAN DIEGO	CA	92123	CREDIT CARD CHARGES FOR DONATIONS		10	22	08	33.50
POSTMASTER	LEAP ROAD	HILLIARD	OH	43026	POSTAGE		08	26	08	205.00
NATIONAL CITY BANK	CEMETERY ROAD	HILLIARD	OH	43026	BANK CHARGE		09	11	08	2.50

* Review the instruction page to determine the appropriate category code.

Page Total $ [redacted]
$661.00