

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full O'Shaughnessy Committee									
To Whom Paid Paymentech						M	D	Y	Amount
						0	1	0	35.00
Address PO Box 29534			Purpose bank service fees						
City Phoenix		State A	Zip Code Z 85038	Check Number eft					
To Whom Paid Chase Bank						M	D	Y	Amount
						0	1	3	14.00
Address PO Box 659754			Purpose bank service fees						
City San Antonio		State T	Zip Code X 78265	Check Number eft					
To Whom Paid Shamrock Club						M	D	Y	Amount
						0	2	0	135.00
Address 60 West Castle Rd			Purpose Membership						
City Columbus		State O	Zip Code H 43207	Check Number DC					
To Whom Paid Paymentech						M	D	Y	Amount
						0	2	0	35.00
Address PO Box 29534			Purpose bank service fees						
City Phoenix		State A	Zip Code Z 85038	Check Number eft					
To Whom Paid Katzinger's						M	D	Y	Amount
						0	2	0	13.76
Address 475 S. Third Street			Purpose meals						
City Columbus		State O	Zip Code H 43215	Check Number DC					
To Whom Paid Ohio Ethics Commission						M	D	Y	Amount
						0	2	0	60.00
Address 30 West Spring Street L3			Purpose filing fee						
City Columbus		State O	Zip Code H 43215	Check Number 1021					
To Whom Paid Shamrock Club						M	D	Y	Amount
						0	2	1	45.00
Address 60 West Castle Rd			Purpose Membership						
City Columbus		State O	Zip Code H 43207	Check Number DC					
To Whom Paid Chase Bank						M	D	Y	Amount
						0	2	2	14.00
Address PO Box 659754			Purpose bank service fees						
City San Antonio		State T	Zip Code X 78265	Check Number DC					