

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full SCHULER FOR SCHOOL BOARD									
To Whom Paid U. S. POSTAL SERVICE						M 1	D 0	Y 1	Amount 132.00
Address 109 MILL STREET			Purpose POSTAGE						
City GAHANNA			State O H		Zip Code 43230		Check Number ELECTRONIC		
To Whom Paid						M 1	D 0	Y 1	Amount 0.00
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State		Zip Code		Check Number		