**31-B** R.C. 3517.10

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## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

| Name of Committee in Full  |                   |  | ·            |              |        |  |  |
|----------------------------|-------------------|--|--------------|--------------|--------|--|--|
| Citizens for Dorrian Commi | ttee              |  |              |              |        |  |  |
| To Whom Paid               |                   |  | М            | D Y          | Amount |  |  |
| Postmaster                 |                   |  | 1 0          | 2 8 0 5      | 111.00 |  |  |
| Address                    | Purpose<br>Stamps | · · ·                                  |              |              |        |  |  |
| City                       | State             | Zip Code                               | Check N      |              |        |  |  |
|                            |                   |  |              | 2195         |        |  |  |
| To Whom Paid               |                   |  | M            | D Y          | Amount |  |  |
| Address                    | Purpose           | Purpose                                |              |              |        |  |  |
| City                       | State             | Zip Code                               | Check Number |              |        |  |  |
| To Whom Paid               | -                 |  | М            | D Y          | Amount |  |  |
| Address                    | Purpose           |  |              |              |        |  |  |
| City                       | State             | Zip Code                               | Check Number |              |        |  |  |
| To Whom Paid               |                   |  | M            | D Y          | Amount |  |  |
| Address                    | Purpose           |  |              | <u></u>      |        |  |  |
| City                       | State             | Zip Code                               | Check N      | Check Number |        |  |  |
| To Whom Paid               |                   |  | M            | D Y          | Amount |  |  |
| Address                    | Purpose           | Purpose                                |              |              |        |  |  |
| City                       | State             | Zip Code                               | Check N      | Check Number |        |  |  |
| To Whom Paid               |                   |  | M            | D Y          | Amount |  |  |
| Address                    | Purpose           |  |              | I            |        |  |  |
| City                       | State             | Zip Code                               | Check N      | lumber       |        |  |  |
| To Whom Paid               |                   | ······································ | М            | D Y          | Amount |  |  |
| Address                    | Purpose           |  | <b>.</b>     | <u> </u>     | •      |  |  |
| City                       | State             | Zip Code                               | Check N      | Check Number |        |  |  |
| To Whom Paid               | •                 |  | M            | D Y          | Amount |  |  |
| Address                    | Purpose           |  | ■ <u> </u>   | I            |        |  |  |
| City                       | State             | Zip Code                               | Check N      | Tumber       |        |  |  |

| Page Total \$111_00 |
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