

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full O'Shaughnessy Committee									
To Whom Paid Friends for Ginther						M	D	Y	Amount
						0	1	2 2	1 5 1,000.00
Address			Purpose Contribution						
City Columbus			State O H		Zip Code		Check Number eft		
To Whom Paid Jane M. O'Shaughnessy CPA						M	D	Y	Amount
						0	1	2 5	1 5 400.00
Address 256 Piedmont Rd,			Purpose Accounting						
City Columbus			State O H		Zip Code 43214		Check Number 1092		
To Whom Paid Chase Bank						M	D	Y	Amount
						0	1	3 0	1 5 14.00
Address PO Box 659754			Purpose Bank Fee						
City San Antonio			State T X		Zip Code 78265		Check Number		
To Whom Paid United Way of Central Ohio						M	D	Y	Amount
						0	2	2 3	1 5 65.00
Address 360 S. Third Street			Purpose George Meanv Dinner						
City Columbus			State O H		Zip Code 43215		Check Number		
To Whom Paid Chase Bank						M	D	Y	Amount
						0	2	2 8	1 5 14.00
Address PO Box 659754			Purpose Bank Fee						
City San Antonio			State T X		Zip Code 78265		Check Number		
To Whom Paid Lindey's						M	D	Y	Amount
						0	3	0 9	1 5 82.27
Address 169 East Beck St			Purpose Meals						
City Columbus			State O H		Zip Code 43206		Check Number DC		
To Whom Paid Chase Bank						M	D	Y	Amount
						0	3	3 0	1 5 14.00
Address PO Box 659754			Purpose Bank Fee						
City San Antonio			State T X		Zip Code 78265		Check Number		
To Whom Paid Ohio Ethics Commission						M	D	Y	Amount
						0	4	0 6	1 5 60.00
Address 30 West Spring Street			Purpose Filing Fee						
City Columbus			State O H		Zip Code 43215		Check Number eft		