

Statement of Expenditures

Prescribed by Secretary of State 2/01

| | | | | | | | |
|---|--|-------------------------------------|-------------------|-----------------------|---|------|----------|
| Name of Committee in Full Friends of O'Grady Committee | | | | | | | |
| To Whom Paid Ronald J. Hagan CPA LLC | | | | M | D | Y | Amount |
| | | | | 0 | 1 | 1507 | 6,000.00 |
| Address 480 S. Third St. | | Purpose CPA Professional Fees | | | | | |
| City Columbus | | State O H | Zip Code 43215 | Check Number 2262 | | | |
| To Whom Paid Mentel for Council | | | | M | D | Y | Amount |
| | | | | 0 | 1 | 2207 | 3,000.00 |
| Address 3886 North High Street | | Purpose Contribution to Campaign | | | | | |
| City Columbus | | State O H | Zip Code 43214 | Check Number 2263 | | | |
| To Whom Paid Cingular | | | | M | D | Y | Amount |
| | | | | 0 | 1 | 2607 | 110.21 |
| Address PO Box 6416 | | Purpose Monthly Phone Charges | | | | | |
| City Carol Stream | | State I L | Zip Code 60197 | Check Number 2264 | | | |
| To Whom Paid Epilepsy Foundation | | | | M | D | Y | Amount |
| | | | | 0 | 1 | 3007 | 100.00 |
| Address | | Purpose Charitable Contribution | | | | | |
| City Columbus | | State O H | Zip Code | Check Number Debit | | | |
| To Whom Paid Claddagh Irish Pub | | | | M | D | Y | Amount |
| | | | | 0 | 2 | 0107 | 96.13 |
| Address 585 S. Front St. | | Purpose Dinner re: Campaign | | | | | |
| City Columbus | | State O H | Zip Code 43215 | Check Number Debit | | | |
| To Whom Paid Claddagh Irish Pub | | | | M | D | Y | Amount |
| | | | | 0 | 2 | 0807 | 103.31 |
| Address 585 S. Front St. | | Purpose Dinner re: Campaign | | | | | |
| City Columbus | | State O H | Zip Code 43215 | Check Number Debit | | | |
| To Whom Paid Cingular | | | | M | D | Y | Amount |
| | | | | 0 | 2 | 2407 | 104.31 |
| Address PO Box 6416 | | Purpose Monthly Phone Charges | | | | | |
| City Carol Stream | | State I L | Zip Code 60197 | Check Number 2266 | | | |
| To Whom Paid Cingular | | | | M | D | Y | Amount |
| | | | | 0 | 2 | 2707 | 533.74 |
| Address PO Box 6416 | | Purpose Phone Equipment | | | | | |
| City Carol Stream | | State I L | Zip Code 60197 | Check Number debit | | | |