

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Quality Schools									
To Whom Paid Heartland Bank						M	D	Y	Amount
						0	4	0	4
Address 810 N Hamilton Rd						Purpose merchant fees			
City Gahanna		State O H		Zip Code 43230		Check Number ACH			
To Whom Paid Executive Mailing Solutions						M	D	Y	Amount
						0	3	2	2
Address 3099 E 14th Street						Purpose mailing fees			
City Columbus		State O H		Zip Code 43229		Check Number			
To Whom Paid Heartland Bank						M	D	Y	Amount
						0	3	0	2
Address 810 N Hamilton Rd						Purpose merchant fees			
City Gahanna		State O H		Zip Code 43230		Check Number ACH			
To Whom Paid Heartland Bank						M	D	Y	Amount
						0	2	0	2
Address 810 N Hamilton Rd						Purpose merchant fees			
City Gahanna		State O H		Zip Code 43230		Check Number ACH			
To Whom Paid Heartland Bank						M	D	Y	Amount
						0	1	0	3
Address 810 N Hamilton Rd						Purpose merchant fees			
City Gahanna		State O H		Zip Code 43230		Check Number ACH			
To Whom Paid American Express						M	D	Y	Amount
						0	3	1	8
Address PO Box 53852						Purpose merchant fees			
City Phoenix		State A Z		Zip Code 85072		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			