Statement of Expenditures

Page ____

Prescribed by Secretary of State 2/01

Name of Committee in Pull THE COMMITTEE TO ELECT	LESLIE KELLY		·	·
To Whom Paid REYNOLDSBURG FESTIVALS INC			M D Y 0 8 1 4 1	Amount 2 \$100.00
Address PO BOX 197	Purpose DONATIC)N		
City REYNOLDSBURG	State OH	Zip Code 43068	Check Number 509	
TO Whom Paid THE INGRAM - WHITE CASTLE FOUNDATION			1 1 2 7 1	Amount 2 \$100.00
Address 1234 E BROAD ST	Purpose DONATIO	DONATION FOR HURRICANE SANDY RELIEF TRIP		
City COLUMBUS	State OH	Zip Code 43205	Check Number 510	
To Whom Paid			M D Y	Amount
Address	Purpose	****		
City	OH State	Zip Code	Check Number	u.
To Whom Paid			M D Y	Amount
Address	Purpose			•
City	State OH	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	<u> </u>	
City	State OH	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			<u> </u>
City	State OH	Zip Code	Check Number	
To Whom Paid	1 1		M D Y	Amount
Address	Purpose		3	
City	State OH	Zip Code	Check Number	8. Su.
To Whom Paid		<u> </u>	M D Y	Amount
Address	Purpose			
City	State OH	Zip Code	Check Number	