

## Statement of Expenditures

Page \_\_\_\_\_

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>New Albany for Kids</b>					
To Whom Paid <b>UPS Store</b>		M <b>11</b>	D <b>28</b>	Y <b>15</b>	Amount <b>132.00</b>
Address <b>5195 Hamstead Village Center Way</b>		Purpose <b>Mailbox Fees</b>			
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Check Number <b>655</b>		
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		
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		
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		
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		

132.00