

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page _____

Name of Committee in Full CONISON FOR COUNCIL												
To Whom Paid SUBURBAN NEWS PUBLICATION						M 1	D 1	Y 0	Y 3	Y 1	Y 1	Amount \$102.00
Address 5255 SINCLAIR ROAD				Purpose								
City COLUMBUS				State OH		Zip Code 43229		Check Number DEBIT				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				
To Whom Paid						M	D	Y	Y	Y	Y	Amount
Address				Purpose								
City				State OH		Zip Code		Check Number				

Page Total **\$102.00**