Page	1

## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

V 00 1 1 1 1 1	_			
Name of Committee in Full				
Safety First To Whom Paid		<del>_</del>	T	<del></del>
Solunar Graphics			$\begin{bmatrix} M & D & Y \\ 0 & 4 & 2 & 4 & 1 & 4 \end{bmatrix}$	Amount 240.86
Address	Purpose		101412141114	1 240.00
1529 Wyandotte Road		ocessing & postag	<u>ge for postcard maili</u>	ng #2
City	State	Zip Code	Check Number	
Columbus	OH L	43212	04634642	
To Whom Paid			M D Y	Amount
Huntington National Bank			0 4 3 0 1 4	5.00
Address	Purpose			
P.O. Box 1558 EA1W37	Bank Fe	ees		
City	State	Zîp Code	Check Number	
Columbus	OH	43216	EFT	
To Whom Paid		-	M D Y	Amount
Solunar Graphics			0 5 0 2 1 4	544.24
Address	Purpose			
1529 Wyandotte Road				
City	State	Zip Code	Check Number	
Columbus	OH	43212	15347201	
To Whom Paid		•	M D Y	Amount
Address	Purpose			<u>-L</u>
City	State	Zip Code	Check Number	
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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		<u>.</u>	M D Y	Amount
Address	Purpose			<b></b>
City	State	Zip Code	Check Number	
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To Whom Paid		<u> </u>	M D Y	Amount
Address	Purpose			<del></del>
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City	State	Zip Code	Check Number	
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