

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Columbus Community Bill of Rights PAC									
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			