

Statement of Expenditures

Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|--|--|--|--|--|--|--|---|--------------------------|-----------------------------|
| Name of Committee in Full Citizens for Mingo | | | | | | | | | |
| To Whom Paid Angie Musselman | | | | | | M | D | Y | Amount \$40.00 |
| Address 12999 Ridgeway Rd | | | | | | Purpose Reimbursement-Filing Fee | | | |
| City Orient | | | | | | State OH | | Zip Code 43146 | Check Number 2006 |
| To Whom Paid Calico, c/o Bucks for Bones | | | | | | M | D | Y | Amount \$70.00 |
| Address 1500 Pinnacle Club Dr | | | | | | Purpose Tickets- 4/16 Event | | | |
| City Grove City | | | | | | State OH | | Zip Code 43123 | Check Number 2007 |
| To Whom Paid Expenditures From Form 31-F | | | | | | M | D | Y | Amount \$8,057.44 |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| 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 | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| 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 | | | |
| City | | | | | | State OH | | Zip Code | Check Number |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | | | | | Purpose | | | |
| City | | | | | | State OH | | Zip Code | Check Number |