

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Franklin County Green Party									
To Whom Paid Connie Hammond						M	D	Y	Amount
Address 166 Acton Rd.						1	1	2	\$90.00
City Columbus						Check Number 1165			
State OH						Zip Code 43214			
Purpose Reimbursement for meeting space payment									
To Whom Paid Robert Hart						M	D	Y	Amount
Address 6686 Thorne St.						1	1	2	\$25.80
City Worthington						Check Number 1166			
State OH						Zip Code 43085			
Purpose Reimbursement for purchase of educational video									
To Whom Paid						M	D	Y	Amount
Address									
City						Check			
To Whom Paid						M	D	Y	Amount
Address									
City						Check No			
To Whom Paid						M	D	Y	Amount
Address									
City						Check Number			
To Whom Paid						M	D	Y	Amount
Address									
City						Check Number			
To Whom Paid						M	D	Y	Amount
Address									
City						Check Number			
To Whom Paid						M	D	Y	Amount
Address									
City						Check Number			
To Whom Paid						M	D	Y	Amount
Address									
City						Check Number			

↑
changed
from
\$28.50