31-B R.C. 3517.10

Page _	1

## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

V 60 % T II	*							
Name of Committee in Full Harmon for Columbus City Council								
To Whom Paid			М	D	l v	Amount		
Columbus Fire Department			0 4		$\begin{bmatrix} \mathbf{y} \\ 0 \end{bmatrix} 5$	Amount 30.00		
Address Purpose								
260 N. Fourth Street		Contribution - Fire Museum						
City Columbus	State H	Zip Code 43215	Check 1	Number 2003				
To Whom Paid U.S. Postmaster			м 0 3	D 1 6	У 0   5	Amount 2,000.00		
Address Purpose 2,000.00								
850 Twin Rivers Dr.		Postage						
City					Check Number			
Columbus	OH	43215	- 14	2009	Ī v			
To Whom Paid			М	D	Y	Amount		
Address Purpose								
City	State	State Zip Code			Check Number			
		•						
To Whom Paid			М	D	Y	Amount		
Address	Purpose							
City	State	State Zip Code		Number				
To Whom Paid		<u>L.</u>	М	D	Ŷ	Amount		
ldress Purpose								
City	State	Zip Code	Check Number					
To Whom Paid			M	D	Y	Amount		
Address	Purpose							
City	State	State Zip Code		Number				
			4					
To Whom Paid			М	D	Y	Amount		
ddress Purpose								
City	State	ate Zip Code		Number				
To Whom Paid		М	D	Y	Amount			
Address	Purpose	Purpose				<u> </u>		
C:L.	State	State Zip Code Check Number						
City	State	Zip Code	Спеск	vaimoer				
		1						