

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full ELECT KLEIN SCHOOL BOARD												
To Whom Paid TACTICAL EDGE						M	D	Y	Amount			
						1	0	2	5	0	7	2 000
Address 929 HARRISON AVE. STE. 305				Purpose CAMPAIGN LITERATURE								
City COLUMBUS				State OH		Zip Code 43215		Check Number 112				
To Whom Paid UNITED STATES POSTAL SERVICE						M	D	Y	Amount			
						1	0	2	5	0	7	26.00
Address POSTCARD STAMPS				Purpose POSTCARD STAMPS								
City NEW ALBANY				State OH		Zip Code 43054		Check Number 113				
To Whom Paid OFFICE MAX #651						M	D	Y	Amount			
						1	0	2	7	0	7	32.01
Address 3826 MORSE RD.				Purpose PRINTING CARTRIDGES								
City COLUMBUS				State OH		Zip Code 43219		Check Number 114				
To Whom Paid SUSAN NCKEE						M	D	Y	Amount			
						1	0	2	9	0	7	144.87
Address 1610 SPIKE CT.				Purpose CAMPAIGN LITERATURE								
City CANFIELD				State OH		Zip Code 44406		Check Number 115				
To Whom Paid UNITED STATES POSTAL SERVICE						M	D	Y	Amount			
						1	0	3	0	0	7	26.00
Address POSTCARD STAMPS				Purpose POSTCARD STAMPS								
City NEW ALBANY				State OH		Zip Code 43054		Check Number 116				
To Whom Paid TACTICAL EDGE						M	D	Y	Amount			
						1	1	1	5	0	7	1,240.13
Address 929 HARRISON AVE. STE. 305				Purpose CAMPAIGN LITERATURE + ROBO CALL								
City COLUMBUS				State OH		Zip Code 43215		Check Number 117				
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				

Page Total \$ **3,469.01**