

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full KEEP HILLIARD BEAUTIFUL PAC									
To Whom Paid STRIPE						M	D	Y	Amount
						0	2	2	34.62
Address			Purpose CREDIT CARD FEES FOR DONATIONS						
City			State		Zip Code		Check Number		
To Whom Paid EXPENDITURES FROM 31-F						M	D	Y	Amount
						0	2	0	484.81
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		

Page Total \$ **519.43**