

Statement of Expenditures

Page _____

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Chris Valentine							
To Whom Paid Gerber for Dublin				M 0	D 9	Y 1	Amount \$250.00
Address 6125 Karrer Place		Purpose Campaign Donation					
City Dublin	State OH	Zip Code 43017	Check Number 1031				
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				
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				

Page Total \$ **\$250.00**