31-B R.C. 3517.10

| Page_ | 1 |
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## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

| Name of Committee in Full         |  |                             |          |               |          |  | 1      |
|-----------------------------------|--|-----------------------------|----------|---------------|----------|--|--------|
|                                   |  |                             |          |               |          |  |        |
| Citizens for Quincel To Whom Paid | -  |                             | 1 1/2    | Ιp            | v        | T  |        |
|                                   |  |                             | M        | D             | Y        | Amount                                       | 710 10 |
| Grassroots Strategies             | 1_   |                             | 110      | 219           | 115      | <u>.                                    </u> | 718.10 |
| Address                           | Purpose                                      |                             |          |               |          |  |        |
| 5990 East Livingston Avenue       | Campaig                                      | gn Literature               |          |               |          |  |        |
| City                              | State  | Zip Code                    | Check N  | lumber        |          |  |        |
| Columbus                          | $  \cap   H$                                 | 43232                       |          | 1007          |          |  |        |
| To Whom Paid                      |  |                             | М        | D             | Y        | Amount                                       |        |
| White Castle                      |  |                             | 1 1      | 013           | 115      |  | 53.00  |
| Address                           | Purpose                                      |                             | 1-:-     | 10:0          | 1        | 1  | 20.00  |
| 1080 South Hamilton Road          |  | Election Night refreshments |          |               |          |  |        |
| City                              | State  |                             |          |               |          |  |        |
| Whitehall                         | 1 1 7 7                                      | 43227                       |          | ebit ca       | -4       |  |        |
|                                   | IOIH   | 43227                       | _        | •             |          | A  |        |
| To Whom Paid                      |  |                             | M        | D             | Y        | Amount                                       |        |
| l                                 | I.   |                             | <u> </u> | <u> </u>      |          | <u> </u>                                     |        |
| Address                           | Purpose                                      |                             |          |               |          |  |        |
|                                   |  |                             |          |               |          |  |        |
| City                              | State  | Zip Code                    | Check N  | vumber        |          |  |        |
|                                   | <u>                                     </u> |                             |          |               |          |  |        |
| To Whom Paid                      |  |                             | М        | D             | Y        | Amount                                       |        |
|                                   |  |                             |          | 1 1           | lı       | ]  |        |
| Address                           | Purpose                                      |                             |          |               |          |  |        |
|                                   | '  |                             |          |               |          |  |        |
| City                              | State Zip Code Check Number                  |                             |          |               |          |  |        |
| City                              | 1  |                             | , and a  |               |          |  |        |
| To Whom Paid                      |  |                             | М        | D             | Y        | Amount                                       |        |
| 10 WIROTE PAID                    |  |                             | 1        | ۱ĭ            | 1 1      | Unionii                                      |        |
|                                   | In   | <del></del>                 | 1        | <u> </u>      | <u> </u> | <u> </u>                                     |        |
| Address                           | Purpose                                      |                             |          |               |          |  |        |
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| City                              | State  | Zip Code                    | Check N  | Vumber        |          |  |        |
|                                   | <u> </u>                                     |                             | <u> </u> |               |          |  |        |
| To Whom Paid                      |  | ·- ·                        | М        | D             | Y        | Amount                                       |        |
|                                   |  |                             |          |               |          |  |        |
| Address Purpose                   |  |                             |          |               |          |  |        |
|                                   | 1  |                             |          |               |          |  |        |
| City                              | State  | Zip Code                    | Check N  | Vumber        |          |  |        |
|                                   | 1  |                             |          |               |          |  |        |
| To Whom Paid                      |  |                             | М        | D             | ΙΥ       | Amount                                       |        |
| 10 William Para                   |  |                             | 1.1      | Ιĩ            | l i      |  |        |
|                                   | In .   | <del></del>                 | 1 1      |               | 1 !      | <u> </u>                                     |        |
| Address Purpose                   |  |                             |          |               |          |  |        |
|                                   | ļ  |                             | T        |               |          |  |        |
| City                              | State  | Zip Code                    | Check 1  | <b>Vumber</b> |          |  |        |
|                                   | 1  |                             | <u> </u> |               |          |  |        |
| To Whom Paid M D Y Amount         |  |                             |          |               |          |  |        |
|                                   |  |                             |          |               |          |  |        |
| Address Purpose                   |  |                             |          |               |          |  |        |
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| Page Total \$ | <u>771.10                                  </u> |
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