

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Kristin Bryant									
To Whom Paid Blocks Bagels						M	D	Y	Amount
						110	310	115	8.29
Address 6115 Mc Naughten Center			Purpose Meeting Expense						
City Columbus			State OH		Zip Code 43232		Check Number DC		
To Whom Paid Kristin Bryant						M	D	Y	Amount
						111	012	115	700.00
Address 338 S High St			Purpose Loan Repayment						
City Columbus			State OH		Zip Code 43215		Check Number 93		
To Whom Paid Huntington Bank						M	D	Y	Amount
						111	116	115	2.50
Address PO Box 1558			Purpose Merchant Fee						
City Columbus			State OH		Zip Code 43216		Check Number EFT		
To Whom Paid Pavpal						M	D	Y	Amount
						110	115	115	2.48
Address 2211 North First St			Purpose Merchant Fee						
City San Jose			State CA		Zip Code 95131		Check Number EFT		
To Whom Paid Pavpal						M	D	Y	Amount
						110	212	115	3.20
Address 2211 North First St			Purpose Merchant Fee						
City San Jose			State CA		Zip Code 95131		Check Number EFT		
To Whom Paid Pavpal						M	D	Y	Amount
						110	310	115	3.20
Address 2211 North First St			Purpose Merchant Fee						
City San Jose			State CA		Zip Code 95131		Check Number EFT		
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		