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## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Citizens for Julia L. Dorrian							
To Whom Paid	M D Y Amo						
Total expenditures from Form 31-F				102609	312.10		
Address	Purpose						
Address	i ii pose						
City	Stat	e [2	Zip Code	Check Number			
Chy		1	'				
To Whom Paid				M D Y Amo	ount		
National City Bank				1 0 3 0 0 9	3.00		
Address	Purpose						
PO Box 5756	Service Fee						
City	State Zip Code			Check Number			
Cleveland	01	Н	44101				
To Whom Paid					ount		
National City Bank				1 1 3 0 0 9	8.00		
Address	Purpose						
PO Box 5756	Service Fee						
	State Zip Code			Check Number			
City Cleveland	01	Н	44101				
To Whom Paid				M D Y Am	ount		
Hummer for Judge Committee				1 0 2 2 0 9	500.00		
Address	Purpose						
4314 Donnington Road	Candidate Contribution						
	State Zip Code			Check Number			
City Columbus	0	H	43220	123			
				M D Y An	rount		
Franklin County Democractic Party  1 0 2 2 0 9 50							
	Purpose						
Address 271 E. State Street	Candidate Contribution						
			Zip Code	Check Number			
City Columbus	0	H	43215	124			
To Whom Paid				M D Y An	nount		
Hummer for Judge Committee				1 0 2 3 0 9	1,000.00		
	Purpose						
Address		dida	te Contribution				
4314 Donnington Road			Zip Code	Check Number			
Columbus		Н	43220	125			
To Whom Paid		1.4			nount		
Franklin County Democractic Party				1 0 3 0 0 9	100.00		
	Purpose						
Address 271 E. State Street	Event Cost						
<u></u>			Zip Code	Check Number			
Columbus		H	43215	127			
			1		mount		
To Whom Paid							
Address Purpose							
Address	1 ,						
Cit.	Sı	ate	Zip Code	Check Number			
City		1	•				