

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for UA Schools						
To Whom Paid Tracy Peters			M 1	D 0	Y 1	Amount \$214.91
Address 2039 Collingswood Rd.		Purpose Reimbursement - Fastsigns Invoice 245-50653 (Stickers)				
City Columbus	State OH	Zip Code 43221	Check Number 1164			
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			
To Whom Paid			M	D	Y	Amount
Address		Purpose				
City	State OH	Zip Code	Check Number			