31-B R.C. 3517.10

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Princillo Tyroon				
Citizens for Priscilla Tyson			IM In Lo	Amount
To Whom Paid Capital Style Magazine			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Amount 18.00
Address	Purpose			
34 South Third Street		ine Subscription		
City Columbus	State O H	Zip Code 43215	Check Number 495	
To Whom Paid Ohio Ethics Commission			M D Y 0 4 0 9 1 3	Amount 35.00
Address	Purpose	···		
30 West Spring Street, Suite L3		Report Filing Fee		
City	State	Zip Code	Check Number	
Columbus	\cap H	43215	496	100
To Whom Paid			M D Y	Amount
Cosi Restaurant of Bexlev	To		0 4 1 7 1 3	2.29
Address 2212 Foot Main Chroot	Purpose	ion Chall Man		
2212 East Main Street	Campaign Staff Meal			
City Bexlev	State H	Zip Code 43209	Check Number Debit	
DexIeV To Whom Paid	() II	43207	M D Y	Amount
. S WROM LARG				· moun
Address	Purpose		<u> </u>	•
City	State	Zip Code	Check Number	A CARLO
To Whom Paid			M D Y	Amount
Address	Purpose	····		
City	State	Zip Code	Check Number	
T W D 1	1			
To Whom Paid M D Y Amount				
Address	Purpose	······································		-
City	State	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			1
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City	State	Zip Code	Check Number	r a lyn M
To Whom Paid	1		M D Y	Amount
Address	Purpose			<u> </u>
City	State	Zip Code	Check Number	

Page Total \$5	5.29
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