Page	1

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full		· · · · · · · · · · · · · · · · · · ·					
Citizens for Tom Kneeland							
To Whom Paid			М	D Y	Amount		
Heartland Bank			018	210 114	21.75		
Address	Purpose						
850 North Hamilton Road	Bank Cl	Bank Checks					
City	State	Zip Code	Check N	umber			
Gahanna	OH	43230					
To Whom Paid			М	D Y	Amount		
Pavpal			1 2	2 4 1 4	0.12		
Address	Purpose						
2211 N. First Street	Accoun	Account set up					
City	State	State Zip Code Check Number					
San Jose	C A	95131		ACH			
To Whom Paid			M	D Y	Amount		
Address	Purpose			l			
0.	C	State Zip Code Check Number					
City	State	Zip Code	Check N	nutoet			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·	<u> </u>	М	D Y	Amount		
			1				
Address	Purpose			· · · · · · · · · · · · · · · · · · ·			
City	State	State Zip Code					
			<u>i</u>				
To Whom Paid			M	D Y	Amount		
Address	Purpose	Purpose					
Сііу	State	Zip Code	Check N	umber	**************************************		
. <u></u>		<u></u>					
To Whom Paid			M I	D Y	Amount		
Address	Purpose						
City	State	Zip Code	Check N	umber			
					Amount		
To Whom Paid			M	D Y	Angula		
Address	Purpose						
City	State	Zip Code	Check Number				
To Whom Paid			М	D Y	Amount		
	In			<u> </u>	_i		
Address	Purpose						
City	State	Zip Code	Check N	lumber			

Page Total \$.87_
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