Statement of Expenditures

Page ____

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Stephanie McCloud		,		
To Whom Paid Ohio Republican Party-State Candidate Fund			$\begin{bmatrix} M & D & Y \\ 1 & 0 & 0 & 1 & 1 \end{bmatrix} 0$	Amount \$1,000.00
Address 211 South Fifth St.	Purpose			
City Columbus	State OH	Zip Code 43215	Check Number 1027	
To Whom Paid Ohio Republican Party-State Candidate Fund			1 2 1 3 1 0	Amount \$5,000.00
Address 211 South Fifth St.	Purpose Contributi	contribution		
City Columbus	State OH	Zip Code 43215	Check Number 1028	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH State	Zip Code	Check Number	A STATE OF THE STA
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH _.	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH,	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			
City	OH.	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purposc			
City	State OH	Zip Code	Check Number	
To Whom Paid			M D Y	Amount
Address	Purpose			· · · · · · · · · · · · · · · · · · ·
City	State OH	Zip Code	Check Number	