Statement of Expenditures

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	1	***************************************
Page		

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Doug Jackson							
To Whom Paid Salvation Army	ACCESSOR SERVICES AND ACCESSOR		M 1 2	D 1 7	o 9	Amount \$0.67	
Address 966 E Main St	Purpose Charitable	Contribution	1 . 4	/	0 9	45.07	
City Columbus	State OH	Zip Code 43215	Check Number Cash				
To Whom Paid Douglas Jackson				1 7	У 0 9	Amount \$1,859.38	
Address 3261 Prairie Gardens Ct	Purpose Loan Repay						
City Hilliard	State OH	Zip Code 43026	Check N 101	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
To Whom Paid			M	D	Y	Amount	
Address	Purpose			J		1	
City	State OH	Zip Code	Check Number				
To Whom Paid			М	D	Y	Amount	
Address	Purpose			<u> </u>	<u></u>		
City	State OH	Zip Code	Check Number				
To Whom Paid			М	D.	Y	Amount	
Address	Purpose			Li	I		
City	State OH	Zip Code	Check Number				
To Whom Paid				D	Y	Amount	
Address	Purpose	<u>'</u>		<u> </u>	li		
City	State OH	Zip Code	Check N	lumber			
To Whom Paid			M	D	Y	Amount	
Address	Purpose				<u> </u>		
City	State OH	Zip Code	Check Number				
To Whom Paid			М	D	Y	Amount	
Address	Purpose						
City	State OH	Zip Code	Check N	umber			