

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Our Communit Our Schools</b>											
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
West Camp Press						0	3	2	1	2	1,862.79
Address						Purpose					
39 Collegeview Rd						Printing					
City		State	Zip Code		Check Number						
Westerville		o	h		43081		1244				
To Whom Paid						M	D	Y	Amount		
West Camp Press						0	3	2	1	2	2,469.13
Address						Purpose					
39 Collegeview Rd						Printing					
City		State	Zip Code		Check Number						
Westerville		o	h		43081		1238				
To Whom Paid						M	D	Y	Amount		
West Camp Press						0	3	2	1	2	1,862.79
Address						Purpose					
39 Collegeview Rd						Printing					
City		State	Zip Code		Check Number						
Westerville		o	h		43081		1239				
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address						Purpose					
City		State	Zip Code		Check Number						