

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>HIGHFIELD FOR COUNCIL</b>									
To Whom Paid <b>OHIO ETHICS COMMISSION</b>						M <b>0</b>	D <b>4</b>	Y <b>1</b>	Amount <b>25.00</b>
Address <b>8 EAST LONG STREET, 10 FLOOR</b>				Purpose <b>FINANCIAL DISCLOSURE STATEMENT</b>					
City <b>COLUMBUS</b>				State <b>O</b>	Zip Code <b>H 43215-2940</b>		Check Number <b>1042</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
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
Address				Purpose					
City				State	Zip Code		Check Number		