

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 2

Name of Committee in Full FRIENDS OF RAMONDA REYES									
To Whom Paid OHIO ETHICS COMMISSION						M	D	Y	Amount 20.00
Address 30 W. SPRING ST. L-3						Purpose FILING FEE			
City COLUMBUS						State OH		Zip Code 43215	
						Check Number 1047			
To Whom Paid RAMONDA REYES						M	D	Y	Amount 60.00
Address 1628 FRANCISCO RD						Purpose REIMB - P.O. BOX			
City COLUMBUS						State OH		Zip Code 43220	
						Check Number 1048			
To Whom Paid COLEMAN FOR COLUMBUS						M	D	Y	Amount 250.00
Address 550 E. WALNUT ST						Purpose CAMPAIGN CONTRIBUTION			
City COLUMBUS						State OH		Zip Code 43215	
						Check Number 1049			
To Whom Paid BAKER FOR THE BOARD						M	D	Y	Amount 50.00
Address P.O. BOX 20608						Purpose CAMPAIGN CONTRIBUTION			
City COLUMBUS						State OH		Zip Code 43220	
						Check Number 1052			
To Whom Paid NSPDK GAMMA ALPHA						M	D	Y	Amount 30.00
Address 16388 SANK CT.						Purpose EVENT			
City COLUMBUS						State OH		Zip Code 43123	
						Check Number 1053			
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			

Page Total \$ **410.00**