Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Karen J Angelou						
To Whom Paid Gahanna Residents In Need (GRIN)			м 1 2	1 6	1 5	Amount \$703.20
Address	Purpose					
760 Morrison Rd. Suites A & B	Donation of excess campaign funds to 501-(c)(3) charity)(3) charity
City Gahanna	State OH	Check Number 0101				
To Whom Paid	, '	<u> </u>	М	D	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Ригроѕе		<u> </u>			
City	State OH	Zip Code	Check Number			
To Whom Paid	,		М	D	Y	Amount
Address	Purpose		!!	L, . !	ii	,
City	State	Zip Code	Check Number			
To Whom Paid			М	D	Ý	Arnount
Address	Purpose					
City	State OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose			<u> </u>		
Сіту	State OH	Zip Code	Check Number			
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 i	Number		*