

Statement of Expenditures

Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|--|--|------------------------------|---------------|-----------------------------|--|---------------|---------------|---------------|-------------------------|
| Name of Committee in Full Citizens for Dorrian Committee | | | | | | | | | |
| To Whom Paid St. Stephens Community House | | | | | | M 0 | D 4 | Y 0 | Amount 60.00 |
| Address 1500 E 17th Ave | | Purpose Luncheon | | Check Number 2136 | | | | | |
| City Columbus | | State O | H H | Zip Code 43219 | | | | | |
| To Whom Paid Buckeye Prining | | | | | | M 0 | D 4 | Y 1 | Amount 613.81 |
| Address 217 N Grant Ave | | Purpose Palm Cards | | Check Number 2137 | | | | | |
| City Columbus | | State O | H H | Zip Code 43215 | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount |
| Address | | Purpose | | Check Number | | | | | |
| City | | State | H | Zip Code | | | | | |

Page Total \$ 673.81