

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full PALEY FOR COLUMBUS							
To Whom Paid CVS Pharmacy				M 1 0	D 2 6	Y 0 9	Amount \$26.55
Address 759 Neil Avenue		Purpose Jet Ink					
City Columbus		State OH	Zip Code		Check Number Debit		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State OH	Zip Code		Check Number		

Page Total **\$26.55**