31-B R.C. 3517.10

Page .	1

## **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full CITIZENS FOR MICHAEL BIVENS							
To Whom Paid			М	D	Y	Amount	
KING T'S			018	0 5	111	550.00	
Address	Purpose						
P.O. BOX 6499	CAMPAIGN T SHIRTS FOR VOLUNTEERS						
City	State						
COLUMBUS To Whom Paid	<u> </u>	43206					
To Whom Paid			M	D	Y 	Amount	
Address	Purpose				<u> </u>		
City	State	Zip Code	Check N	Number			
•							
To Whom Paid			м 	D	Y	Amount	
Address	Purpose						
City	State	Zip Code	Check N	Number			
To Whom Paid	t'		м !	D	Y	Amount	
Address	Purpose			•		-	
City	State	Zip Code	Check i	Check Number			
To Whom Paid	<u></u>		M	D	Y	Amount	
Address	Purpose				<u>-</u>		
City	State	Zip Code	Check 1	Number			
To Whom Paid			M	D 	Y 	Amount	
Address	Purpose						
City	State	Zip Code	Check 1	Number		is	
To Whom Paid	<u> </u>		М	D	Y	Amount	
Address	Purpose		•				
City	State	Zip Code	Check 1	Check Number			
To Whom Paid			м 	D	Y 	Amount	
Address	Purpose						
City	State	Zip Code	Check 1	Number			

Page Total \$	550.00
---------------	--------