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FRANKLIN COUNTY  
BOARD OF ELECTIONS

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full Friends of Bob Bailey									
To Whom Paid Ohio Ethics Commission						M	D	Y	Amount
						0	4	1	25.00
Address 30 W. Spring Street, L3		Purpose Financial Disclosure filing							
City Columbus		State O	H	Zip Code 43215	Check Number 1014				
To Whom Paid Ohio Ethics Commission						M	D	Y	Amount
						0	5	1	10.00
Address 30 W. Spring Street, L3		Purpose Financial Disclosure filing - Bal due							
City Columbus		State O	H	Zip Code 43215	Check Number 1015				
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				
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

Page Total \$ 35.00