Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Mingo						
To Whom Paid			М	D	Y	Amount
Cindi Becker			1 2	2 7	1 6	\$39.98
Address 3046 Bretton Woods Dr	Purpose Reimbursement; Travel Expense					
City Columbus	State OH	Zip Code 43231	Check Number 2752			
To Whom Paid 3rd & Gay Parking	•		м 1 2	D 2 7	Y 1 6	Amount \$8.00
Address 72 E Gay St	Purpose Parking					
City Columbus	State OH	Zip Code 43215	Check 1 DC	Vumber		
To Whom Paid Mimi's Cafe				D 3 0	Y 1 6	Amount \$37.13
Address 1428 Polaris Parkway	Purpose Committee Meeting Expenses					
City Columbus	State OH	Zip Code 43240	Check Number DC			
To Whom Paid Total Expenditures From Form 31-F			М	Ď	Y	Amount \$9,430.30
Address	Purpose			J	•	
City	State OH	Zip Code	Check Number			
To Whom Paid			М	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 Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check Number			
To Whom Paid		<u> </u>	М	D	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check	Number		