

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>THE ELECT STEVEN M BENNETT COMMITTEE</b>											
To Whom Paid <b>EXPENDITURE FORM 31-F</b>							M	D	Y	Amount	
							0	9	12	13	189.25
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									
To Whom Paid							M	D	Y	Amount	
Address					Purpose						
City		State	Zip Code		Check Number						
		OH									