

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>The Committee For A Better Clinton Township</b>									
To Whom Paid <b>FOP Foundation</b>						M	D	Y	Amount
						0	4	1	6
						1	9		50.00
Address <b>6800 Schrock Hill CT</b>				Purpose <b>Charity Donation</b>					
City <b>Columbus</b>				State <b>OH</b>	Zip Code <b>43229</b>		Check Number <b>1008</b>		
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
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