

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page \_\_\_\_\_

Name of Committee in Full <b>Truro Twp Fire/EMS Levy Fund</b>									
To Whom Paid <b>Fifth Third Bank</b>						M	D	Y	Amount <b>\$3.00</b>
Address <b>6935 E. Main St</b>						Purpose <b>\$3.00 Monthly fee</b>			
City <b>Reynoldsburg</b>				State <b>OH</b>	Zip Code <b>43068</b>	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
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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			