

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full Franklin County Democratic Lawyers Club PAC										
To Whom Paid Expenditures from Form 31-F							M	D	Y	Amount \$230.82
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City				State OH	Zip Code		Check Number			

Page Total **\$230.82**