Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full SUPPORT LACORTE FOR MAYOR CAMPAIGN						
To Whom Paid			M D Y	Amount		
FIFTH THIRD BANK Address	In	<u>_</u>	0 4 2 9 1 5	\$12.95		
	Purpose CHECK PRINTING					
City CINCINNATI	State OH	Zip Code	Check Number DEBIT			
To Whom Paid WEB.COM			M D Y O S O S O S O S O S O S O S O S O S O	Amount \$11.90		
Address	Purpose WEBSITE SETUP					
City	State	Zip Code	Check Number	_		
	FL .		DEBIT			
To Whom Paid EXPENDITURES FROM FORM 31-F			M D Y 1 5	Amount \$633.00		
Address	Purpose		<u> </u>			
City	State OH	Zip Code	Check Number			
To Whom Paid FIFTH THIRD BANK			M D Y 0 5 1 2 1 5	Amount \$11.00		
Address	Purpose BANK FEES					
City CINCINNATI	State OH	Zip Code	Check Number DEBIT	,		
To Whom Paid CVS	·	M D Y 1 5	Amount \$6.44			
Address STORE 0694	Purpose OFFICE SUF	PPLIES	· · · · · · · · · · · · · · · · · · ·			
City WHITEHALL	State OH	Zip Code 43213	Check Number DEBIT			
To Whom Paid MTOT			M D Y 5	Amount \$8.32		
Address	Purpose SERVICE FEE					
City	State OH	Zip Code	Check Number DEBIT			
To Whom Paid WEB.COM			M D Y 0 6 0 4 1 5	Amount \$32.90		
Address	Purpose WEBSITE FE	EES				
City	State FL	Zip Code	Check Number DEBIT			
To Whom Paid USPS M D Y ₁ Amount O 6 1 0 1 5 \$10.29						
Address YEARLING ROAD	Purpose STAMPS					
City WHITEHALL	State OH	Zip Code 43213	Check Number DEBIT			