

FOR PAPER FILING ONLY

Statement of Expenditures

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Prescribed by Secretary of State 2/01

| | | | | | | | | | |
|--|--|--|--|--|--|--|--------------------------|---|-----------------------------|
| Name of Committee in Full Committee to Re-elect Judge Bender | | | | | | | | | |
| To Whom Paid Anne M. Petit | | | | | | M | D | Y | Amount \$224.42 |
| Address 161 Alton Road | | | | | | Purpose Personal Services | | | |
| City Galloway | | | | | | State OH | Zip Code 43119 | | Check Number 1015 |
| To Whom Paid John F. Bender | | | | | | M | D | Y | Amount \$500.00 |
| Address 7156 Asheville Park Drive | | | | | | Purpose Reimbursement - holiday gift cards for court staff | | | |
| City Columbus | | | | | | State OH | Zip Code 43235 | | Check Number 1016 |
| 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 **\$724.42**