Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full						
Truco Two fire/EMS Levy Fund						
To Whom Paid Fifth Third Bon	ik.	_	061213	Amount 50		
Name of Committee in Full Trucks Tup Fire EMS Levy Fund To Whom Paid Fifth Third Bank Address 955 Eo Main St. Purpose State Tip Code City State Tip Code Challenge Chal						
Reynoldsburg	State OH	Monthly fee Zip Code 43008	Check Number			
To Whom Paid	, , , , , , , , , , , , , , , , , , ,		M D Y	Amount		
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