

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Committee to Elect Karen Dover For SWCS Board</i>					
To Whom Paid <i>Fifth Third Bank</i>		M	D	Y	Amount
Address <i>910 Springtown Rd</i>		Purpose <i>Bank Fees</i>			
City <i>Croove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Check Number		
To Whom Paid		M	D	Y	Amount <i>50.33</i>
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		