31-B
R.C. 3517.10

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full: Friends of Mofil

To Whom Paid	Address	City	State	Zip Code	Purpose	Check Number	M	D	Y	Amount
Keybank		Columbus	OH		bank fees		01	30	09	10.75
Keybank		Columbus	OH		bank fees		02	27	09	10.75
Keybank		Columbus	OH		bank fees		03	31	09	10.75
Keybank		Columbus	OH		bank fees		04	30	09	10.75
Keybank		Columbus	OH		bank fees		05	29	09	10.75
Keybank		Columbus	OH		bank fees		06	30	09	10.75
Keybank		Columbus	OH		bank fees		07	31	09	10.75
Clintonville Community Resources Center		Columbus	OH				09	02	09	55.85

Page Total $ 131.10