Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Robin Starrett For SWCS School Board						
To Whom Paid Total loan payments made from form no. 31-C			м 1 1	D 3 0	ү 0 9	Amount \$182.92
Address	Puipose Payment on	loan from Robin Starre	tt			
City	State OH	Zip Code	Check N 1009	umber		
To Whom Paid			M	D.	Y	Amount
Address	Purpose					
City	State OH	Zip Code	Check N	umber		
To Whom Paid			М	D	Y	Amount
Address	Purpose					
City	OH State	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				<u> </u>	
City	OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose		M	.t		
City	State OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose		a			
City	State OH	Zip Code	Check Number			
To Whom Paid			М	D	Y	Amount
Address	Purpose			J	.4	
City	State OH	Zip Code	Check 1	Vumber		