

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full Rutherford for Ward 3 Council												
To Whom Paid Charter One						M 1	D 2	Y 3	Y 1	Y 1	Y 0	Amount \$11.99
Address PO Box 7000				Purpose Bank Monthly Charge								
City Providence,				State RI	Zip Code 02940		Check Number bank statement					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					
To Whom Paid						M	D	Y	Y	Y	Amount	
Address				Purpose								
City				State OH	Zip Code		Check Number					

Page Total **\$11.99**