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				elik paningan menganyah	entra companya da su					
Olmstead for Trustee										
To Whom Paid			M	D	ΙΥ	Amount				
National City Bank				9 1 1						
Address	Purpose				<u> </u>					
P.O. Box 5756	Check	Checks for Campaign Account - Direct Debit to Checking								
City	State Zip Code Check Number									
Cleveland	O H 44101			EFT						
To Whom Paid			M	D	Y	Amount				
Address	Purpose									
City	State	Zip Code	Check	Number						
To Whom Paid			М	D	Y	Amount				
Address	Purpose									
C.	State Tin Code					Check Number				
City	State Zip Code			Number						
To Whom Paid				In	1 17					
10 Whom Paid			M	D	Y	Amount				
Address	Purpose				<u></u>	1				
Address	ruipose									
City	State	Zip Code	Check	Number						
City	Julie	Zap code	Check	rumber						
To Whom Paid			М	D	Y	Amount				
10 WHOM I MA			111		ĺ	r unount				
Address	Purpose				<u> </u>					
	1									
City	State	Check 1	Number							
		Zip Code								
To Whom Paid			М	D	Y	Amount				
Address	Purpose	***************************************								
City	State	Zip Code	Check 1	Number						
o Whom Paid			М	D	Y	Amount				
ddress	Purpose			***************************************		•				
ity	State	Zip Code	Check N	lumber						
o Whom Paid			M	D	Y	Amount				
ddress	Purpose									
ity	State	Zip Code	Check N	lumber						