Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Families for Charles Wise			
To Whom Paid Key Bank			M D Y Amount 0 6 0 3 0 9 \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid Key Bank			0 7 0 6 0 9 Amount \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	OH State	Zip Code 44101	Check Number
To Whom Paid Key Bank			M D Y Amount 0 9 \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid Key Bank			0 9 0 4 0 9 Amount \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid Key Bank			M D Y Amount 1 0 0 6 0 9 \$5.00
Address PO Box 93885	Purpose Bank Fee		***************************************
City Cleveland	OH State	Zip Code 44101	Check Number
To Whom Paid Key Bank			M 1 1 0 4 0 9 Amount \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid  Key Bank			M D Y Amount 1 2 0 4 0 9 \$5.00
Address PO Box 93885	Purpose Bank Fee		
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid			M D Y Amount
Address	Purpose		
City	State OH	Zip Code	Check Number