

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page \_\_\_\_\_

|  |  |  |  |  |  |  |   |                          |                           |
|--|--|--|--|--|--|--|---|--------------------------|---------------------------|
| Name of Committee in Full<br><b>Truro Twp Fire/EMS Levy Fund</b> |  |  |  |  |  |  |   |                          |                           |
| To Whom Paid<br><b>Fifth Third Bank</b>                          |  |  |  |  |  | M  | D | Y                        | Amount<br><b>\$3.00</b>   |
| Address<br><b>6935 E. Main St</b>                                |  |  |  |  |  | Purpose<br><b>\$3.00 Monthly fee</b>             |   |                          |                           |
| City<br><b>Reynoldsburg</b>                                      |  |  |  |  |  | State<br><b>OH</b>                               |   | Zip Code<br><b>43068</b> |                           |
| To Whom Paid<br><b>None</b>                                      |  |  |  |  |  | M  | D | Y                        | Amount<br><b>\$200.00</b> |
| Address  |  |  |  |  |  | Purpose<br><b>Accidental withdrawal from ATM</b> |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |
| To Whom Paid   |  |  |  |  |  | M  | D | Y                        | Amount                    |
| Address  |  |  |  |  |  | Purpose  |   |                          |                           |
| City   |  |  |  |  |  | State  |   | Zip Code                 |                           |