

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Jan Gorniak									
To Whom Paid Fifth Third Bank						M	D	Y	Amount \$30.00
Address PO BOX 630900			Purpose Bank fees for 7/1/15 -12/31-15						
City Cincinnati			State OH	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						
City			State OH	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						
City			State OH	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						
City			State OH	Zip Code		Check Number			
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City			State OH	Zip Code		Check Number			