Statement of Expenditures

| | 1 | |
|------|---|--|
| Page | _ | |

Prescribed by Secretary of State 2/01

| Name of Committee in Full Friends of Jan Gorniak | | | | | | |
|--|---|----------|------------------|--------------|----------|-------------------|
| To Whom Paid | | | 1.4 | , D | 1 17 | [1 |
| Fifth Third Bank | | | M | ^B | | Amount \$30.00 |
| Address PO BOX 630900 | Purpose Bank fees for 7/1/15 -12/31-15 | | | | | |
| City Cinncinnati | State OH | Zip Code | Check Number | | | |
| To Whom Paid | <u> </u> | | М | D | Y | Amount |
| Address | Ршроѕе | | I <u>. ! .</u> . | <u> </u> | <u> </u> | |
| City | State OH | Zip Code | Check N | umber | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | Purpose | | | | | • |
| City | State OH | Zip Code | Check N | umber | | |
| To Whom Paid | | | M | D · | Y | Amount |
| Äddress | Рштроѕе | | | <u>. :_</u> | <u></u> | A. |
| City | State OH | Zip Code | Check N | umber | | |
| To Whom Paid | | , | M | D | ` | Amount |
| Address | Ршроѕе | | • | | | • |
| City | State OH | Zip Code | Check Number | | | |
| To Whom Paid | · · · · · · · · · · · · · · · · · · · | | M | D | ľ | Amount |
| Address | Purpose | | | 1 | | , |
| City | State OH | Zip Code | Check N | umber | | |
| To Whom Paid | | | M | D | ľ | Amount |
| Address | Рштроѕе | | | , , | <u> </u> | |
| City | State OH | Zip Code | Check N | lumber | | |
| To Whom Paid | | | M | D | Y | Amount |
| Address | Purpose | | | | | |
| City | State OH | Zip Code | Check N | Sumber | | |