

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Bendig for Judge									
To Whom Paid Charles Bendig						M	D	Y	Amount
						0	7	0	32,737.02
Address 557 Main Street				Purpose Repayment Campaign Expenditures					
City Groveport				State O	H	Zip Code 43125		Check Number	
To Whom Paid Graphics T's						M	D	Y	Amount
						1	1	0	500.00
Address 532 Main Street				Purpose Hand Cards					
City Groveport				State O	H	Zip Code 43125		Check Number 1003	
To Whom Paid Rosebriar Shakespeare Co.						M	D	Y	Amount
						1	0	2	30.00
Address				Purpose Advertising					
City				State		Zip Code		Check Number 1004	
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State		Zip Code		Check Number	
To Whom Paid						M	D	Y	Amount
Address				Purpose					
City				State		Zip Code		Check Number	