

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Harvey for Bexley Auditor</b>									
To Whom Paid <b>William Harvey</b>						M	D	Y	Amount
						1	2	2	0
						1	3		4.75
Address <b>417 Westland Ave.</b>				Purpose <b>loan repayment</b>					
City <b>Bexley</b>		State <b>O H</b>		Zip Code <b>43209</b>		Check Number <b>1212</b>			
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			
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			