

Statement of Expenditures

Prescribed by Secretary of State 8/95

Name of Committee in Full LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 423 PCE FUND									
To Whom Paid <i>Committee for Jim Hughes</i>						M D Y <i>04 20 11</i>		Amount <i>1,000.00</i>	
Address <i>14 E. May St.</i>				Purpose		Category Code*			
City <i>Cols</i>		State <i>OH</i>		Zip Code <i>43215</i>		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			
To Whom Paid						M D Y		Amount	
Address				Purpose		Category Code*			
City		State		Zip Code		Category Code*			

* Review the instruction page to determine the appropriate category code.

Page Total \$ *1000.00*