

Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full COMMITTEE TO ELECT ALBERT IOSUE												
To Whom Paid KEYBANK						M	D	Y	Amount			
						0	1	3	1	1	4	\$3.00
Address PO BOX 22114				Purpose BANK SERVICE CHARGE								
City ALBANY				State NY		Zip Code 12201		Check Number				
To Whom Paid KEYBANK						M	D	Y	Amount			
						0	2	2	8	1	4	\$3.00
Address PO BOX 22114				Purpose BANK SERVICE CHARGE								
City ALBANY				State NY		Zip Code 12201		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				