

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full Keep Council Open									
To Whom Paid USBank						M	D	Y	Amount \$2.00
Address						1	2	0	8
Purpose service charge						1	1		
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			
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			