

Statement of Expenditures

Prescribed by Secretary of State 2/01

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|---|--|--|--|--|--|--|--|--------------------------|---|-----------------------------|
| Name of Committee in Full COMMITTEE TO RE-ELECT JUDGE BENDER | | | | | | | | | | |
| To Whom Paid Franklin County Republican Party | | | | | | | M | D | Y | Amount \$5,000.00 |
| Address 14 E Gay St | | | | | | | Purpose Contribution to Operating Expenses | | | |
| City Columbus | | | | | | | State OH | Zip Code 43215 | | Check Number 1005 |
| To Whom Paid Anne M Petit | | | | | | | M | D | Y | Amount \$350.00 |
| Address 161 Alton Road | | | | | | | Purpose Campaign Services | | | |
| City Galloway | | | | | | | State OH | Zip Code 43119 | | Check Number 1006 |
| To Whom Paid Total Expenditures for FR 9/23/10 from Form 31-F | | | | | | | M | D | Y | Amount \$768.63 |
| 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 |

Page Total **\$6,118.63**