

# Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee 4 Children</b>											
To Whom Paid <b>Expenditures from Form 31-F</b>								M 0	D 8	Y 2	Amount \$2,746.63
Address				Purpose							
City				State OH	Zip Code		Check Number				
To Whom Paid <b>Expenditures from Form 31-F</b>								M 0	D 9	Y 1	Amount \$2,891.97
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 \$5,638.60