Statement of Expenditures

Page ____

Prescribed by Secretary of State 2/01

Name of Committee in Full Families for Charles Wise				
To Whom Paid Key Bank			0 6 0 3 0 9 Amount \$5.00	
Address PO Box 93885	Purpose Bank Fee		*	
City Cleveland	State OH	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 0 7 0 6 0 9 \$5.00	
Address PO Box 93885	Purpose Bank Fee			
City Cleveland	State OH	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 0 8 0 4 0 9 \$5.00	
Address PO Box 93885	Purpose Bank Fee			
City Cleveland	State OH	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 0 9 0 4 0 9 \$5.00	
Address PO Box 93885	Purpose Bank Fee	1 -		
City Cleveland	State OH	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 1 0 0 6 0 9 \$5.00	
Address PO Box 93885	Purpose Bank Fee		**************************************	
City Cleveland	OH State	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M 1 D Y Amount \$5.00	
Address PO Box 93885	Purpose Bank Fee		•	
City Cleveland	OH State	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 1 2 0 4 0 9 \$5.00	
Address PO Box 93885	Purpose Bank Fee			
City Cleveland	OH State	Zip Code 44101	Check Number	
To Whom Paid Key Bank			M D Y Amount 0 1 0 5 1 0 \$5.00	
Address PO Box 93885	Purpose Bank Fee			
City Cleveland	State OH	Zip Code 44101	Check Number	