R.C. 3517.10

## **Statement of Expenditures**

Page \_\_\_\_

Prescribed by Secretary of State 2/01

Name of Committee in Full		:	
THE ELECT STEVEN M. BENNETT COMM To Whom Paid	/		M D Y Amount
OHIO ETHICS COMMISSION		1	0 4 1 3 1 2 \$35.00
		DIȘCLOSURE FILING	FEE
City COLUMBUS	State OH	Zip Çode 43215	Check Number 1042
To Whom Paid			M D Y Amount
Address	Purpose		<u> </u>
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	OH State	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 Çode	Check Number