



# Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee to Re-Elect Judge Bender				
To Whom Paid John F. Bender		Date (MM/DD/YYYY) 02/07/2018		Amount 350.00
Street Address 6025 Kenzie Lane		Purpose Reimburse for SC attorney registration fee		
City Dublin	State OH	Zip Code 43017	Check Number 1038	
To Whom Paid Anne M. Petit		Date (MM/DD/YYYY) 02/07/2018		Amount 300.00
Street Address 161 Alton Road		Purpose Treasurer/finance services		
City Galloway	State OH	Zip Code 43119	Check Number 1039	
To Whom Paid Anne M. Petit		Date (MM/DD/YYYY) 08/15/2018		Amount 402.50
Street Address 161 Alton Road		Purpose Reimburse for charitable contribution to Moritz/close acct.		
City Galloway	State OH	Zip Code 43119	Check Number 1040	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	Zip Code	Check Number	

Page Total \$ 1,052.50