



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee				***************************************	
Nicodemus for Trustee					
To Whom Paid	Date (MM/DD/Y	Date (MM/DD/YYYY)			
Grassroots Stratagies			12/12/2017		
Street Address					
5990 E Livingston Ave.	T- Shirts				
City	State	Zip Code Check Number			
Columbus	ОН	43232 275789			
To Whom Paid		Date (MM/DD/Y	YYY)	Amount	
Street Address	Purpose				
City	State	Zip Code		Check Number	
J.,	ОН	Lip Sous		ok Humber	
To Whom Paid		Date (MM/DD/Y	YYY)	Amount	
Street Address	Purpose				
City	State	Zip Code Check Number			
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To Whom Paid		Date (MM/DD/Y	YYY)	Amount	
Street Address	Purpose				
City	State	Zip Code	Che	ck Number	
To Whom Paid		Date (MM/DD/Y	YYY)	Amount	
Street Address	Purpose	Purpose			
City	State	Zip Code Check Number			
	ОН				

Page Total \$	92.45	