



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

2018 MAR 30 PM 4:09

<b>Full Name of Committee</b> Franklin County Adelante Democrats			
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 11/10/2017	Amount 11.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
To Whom Paid 5/3 Bank		Date (MM/DD/YYYY) 12/12/2017	Amount 11.00
Street Address PO Box 630900		Purpose Bank Fee	
City Cincinnati	State OH	Zip Code 45263	Check Number
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
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number