



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
Friends of Schregardus						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Friends of Mary B. Relotto			04/10/2018		8 53.41	
Street Address	Purpose					
177 Croswell Rd	campaign contribution with proceeds of acct after closing					
City	State	e Zip Code Check Number		ck Number		
Columbus	он	43214 cashiers chk 29		shiers chk 2956745		
To Whom Paid	<u></u>		Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	te Zip Code Check Number		ck Number		
	он	·				
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip Code Check Number		eck Number		
	ОН					
To Whom Paid	1		Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip	Code	Che	eck Number	
	ОН	_,	,			
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip Code Check Number		eck Number		
	ОН					

\$ ^{53.41}	
	\$ ^{53.41}