

## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
Friends & Sandi Allen						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Friends of Sandi Allen To Whom Paid  Stripe, Com			12/11/2019		24.06	
Street Address	Purpose		1			
Online	transaction fees					
City	State			eck Number		
	OH					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address			12/26/2019		10.50	
Street Address	Purpose					
Online	Website					
City	State	Zip Code		Che	Check Number	
•	он					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
			,			
				<u>.</u>		
eet Address Purpose						
City	State	Zip Code Check Number		eck Number		
•	ОН	•		1		
	011					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
reet Address Purpose						
oli oct Addios						
City	State	Zip	Code	Che	eck Number	
	он					
To Whom Paid			Data (MANA/DDAVAVA)		Amount	
TO THIOLET AID			Date (MM/DD/YYYY)		, anount	
Street Address	Purpose	_				
	•					
City	State	te Zip Code Check Number		eck Number		
-	он					

Page Total \$ 30,56