



**Statement of Expenditures**

**Form 31-B**

R.C. 3517.10

<b>Full Name of Committee</b>				
To Whom Paid <i>Huntington Bank</i>		Date (MM/DD/YYYY) <i>12-15-2017</i>	Amount <i>\$ 3.00</i>	
Street Address		Purpose <i>Bank fee</i>		
City	State OH	Zip Code	Check Number	
To Whom Paid <i>Tim Lecklider</i>		Date (MM/DD/YYYY) <i>12-16-2017</i>	Amount <i>\$ 2656.73</i>	
Street Address <i>6305 Worsham Way</i>		Purpose <i>Reimbursement</i>		
City <i>Dublin</i>	State OH	Zip Code <i>43017</i>	Check Number <i>Electronic</i>	
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	

Page Total \$ *2659.73*