



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
Citizens for Bonnie Michael						
To Whom Paid		Date (MM/DD/YYYY)		Amount		
Kroger			03/10/2019		4.49	
Street Address	Purpose					
60 Worthington Mall	Brainstorm Meeting					
City	State	Zip	Code Check Number			
Wothington	он	430	Debit Card			
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Kroger				19	41.06	
Street Address	Purpose		<u> </u>			
60 Worthington Mall	Brainstorm Meeting					
City	State	Zip	Zip Code Ch		neck Number	
Worthington	он	430	085 Del		ebit Card	
To Whom Paid			Date (MM/DD/YYYY) Amount		Amount	
Ohio Ethics Commission			04/04/2019		35.00	
Street Address	Purpose					
30 W Spring St L3	2018 Financial Disclosure Statement Filing					
City	State	Zip	Code Check Number			
Columbus	он	432	Debit Card		bit Card	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
USPS	PS		05/06/2019		6.05	
Street Address	Purpose					
393 E Orange Rd	11 55-cent :	1 55-cent stamps				
City	State	Zip (Code	Che	ck Number	
Lewis Center	ОН	430)35	De	bit Card	
To Whom Paid	Date (MM/DD/YYYY) Amount		Amount			
Worthington Area Chamber of Commerce			05/17/20	19	65.00	
Street Address	Purpose					
90 E Wilson Bridge Road Suite 100	Reds, Whites & Desserts Registration Event					
City	State	Zip	Code Check Number		ck Number	
Worthington	ОН	430	085	De	bit Card	

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