



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Joel A. Greff				
To Whom Paid Paypal		Date (MM/DD/YYYY) 09/16/2019		Amount 3.20
Street Address POB 45950		Purpose Credit Card Fee		
City Omaha	State NE	Zip Code 68154	Check Number EFT	
To Whom Paid Paypal		Date (MM/DD/YYYY) 09/17/2019		Amount 7.55
Street Address POB 45950		Purpose Credit Card Fees		
City Omaha	State NE	Zip Code 68154	Check Number EFT	
To Whom Paid Paypal		Date (MM/DD/YYYY) 10/02/2019		Amount 3.20
Street Address POB 45950		Purpose Credit Card Fees		
City Omaha	State NE	Zip Code 68154	Check Number EFT	
To Whom Paid Paypal		Date (MM/DD/YYYY) 09/12/2019		Amount 3.20
Street Address POB 45950		Purpose Credit Card Fees		
City Omaha	State NE	Zip Code 68154	Check Number EFT	
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 10/12/2019		Amount 22.00
Street Address 2570 E. Main Street		Purpose Credit Card Fees - August/September		
City Bexley	State OH	Zip Code 43209	Check Number EFT	

Page Total \$ 39.15