



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee							
WHITNEY SMITH FOR OHIO							
To Whom Paid			Date (MM/DD/YYYY)		Amount		
WIX.COM			10/07/19		16.00		
Street Address	Purpose						
200 SE 6TH STREET	SERVICE FEES						
City	State Zip Code Check Number			ack Number			
FT LAUDERDALE	FL	333	301				
To Whom Paid			Date (MM/OD/YYYY)		Amount		
WIX.COM			10/21/	/19	16.00		
Street Address	Purpose						
200 SE 6TH STREET	SERVICE FEES						
City	State	Zip (Code	Che	ck Number		
FT LAUDERDALE	FL	333	301				
To Whom Pald			Date (MM/DD/YYYY) Amount				
WIX.COM			10/29/19 16.0		16.00		
Sireet Address	Purpose						
200 SE 6TH STREET	SERVICE FEES						
City	State	Zip Gode Check Nu			eck Number		
FT LAUDERDALE	FL 33301		301				
To Whom Paid			Date (MM/DD/YYYY)		Amount		
WIX.COM			11/05/	/19	16.00		
Street Address	Purpose						
200 SE 8TH STREET	SERVICE FEES						
City	State	Zip	Code	Che	ck Number		
FT LAUDERDALE	FL	333	301				
To Whom Paid			Date (MM/DD/YYYY)		Amount		
WIX.COM			11/18/19 16.00		16.00		
Street Address	Purpose						
200 SE 6TH STREET	SERVICE FEES						
Glty	State	Zip Code Check Number		sck Number			
FT LAUDERDALE	FL	333	301				

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Page	Total	\$		 	