



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Joel A. Greff			
To Whom Paid Ohio Ethics Commission		Date (MM/DD/YYYY) 09/20/2019	Amount 35.00
Street Address 30 W. Spring Street		Purpose Campaign Finance Report Filing	
City Columbus	State OH	Zip Code 43215	Check Number EFT
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State NE	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State NE	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 \$ **35.00**