OFFICE OF THE
Ohio Secretary of State

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee
Citizens For Robinette

To Whom Paid	Date (MM/DD/YYYY)	Amount
Anedot	08/06/19	$1.30

Street Address	Purpose		
Website	online donation website Card processing fees		
City	**State**	**Zip Code**	**Check Number**
	OH		debit

To Whom Paid	Date (MM/DD/YYYY)	Amount
Anedot	09/09/19	$4.30

Street Address	Purpose		
Website	online donation website Card processing fees		
City	**State**	**Zip Code**	**Check Number**
	OH		debit

To Whom Paid	Date (MM/DD/YYYY)	Amount
Anedot	09/12/19	$4.30

Street Address	Purpose		
Website	online donation website Card processing fees		
City	**State**	**Zip Code**	**Check Number**
	OH		debit

To Whom Paid	Date (MM/DD/YYYY)	Amount
Anedot	09/24/19	$2.30

Street Address	Purpose		
website	online website donations Card processing fees		
City	**State**	**Zip Code**	**Check Number**
	OH		debit

To Whom Paid	Date (MM/DD/YYYY)	Amount
Anedot	09/26/19	$10.30

Street Address	Purpose		
Website	online donation website Card processing fees		
City	**State**	**Zip Code**	**Check Number**
	OH		debit

Page Total $ $22.50