



# Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> FRIENDS OF WALLEY OBERT			
To Whom Paid Ultra Prints		Date (MM/DD/YYYY) 10-7-19	Amount \$201.00
Street Address 4870 Lockbourne Road		Purpose Banners and Wires	
City Columbus	State OH	Zip Code 43207	Check Number Debit card
To Whom Paid Ultra Prints		Date (MM/DD/YYYY) 10-15-19	Amount \$306.40
Street Address 4870 Lockbourne Road		Purpose T-Shirts	
City Columbus	State OH	Zip Code 43207	Check Number Debit card
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
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number