

## **Statement of Expenditures**

Form 31-B

R.C. 3517.10

Full Name of Committee						
Jadwin for Gahanna						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Laurie Jadwin			06/07/19		1500.00	
Street Address	Purpose					
1222 Pond Hollow Dr.	Reimbursements for campaign expenses					
City	State	Zip	Code Check Number			
New Albany	он	430	0092			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·		Date (MM/DD/YYYY)		Amount	
Lindsey Rutter	05/01/2019 450.00			450.00		
Street Address	Purpose	ose				
64 E. Cooke Rd/	design services, signs and logo					
City	State	Zip	Code Check Number			
Columbus	он	432	214 0091		91	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Stripe	04/08/2019 3.81			3.81		
Street Address	Purpose					
510 Townsend St.	fee -online donation					
City	State	Zip	Code Check Number			
San Francisco	CA	941	103			
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Stripe	04/10/2019 1.03			1.03		
Street Address	Purpose					
510 Townsend St.	fee-online donation					
City	State	Zip	Code	Che	eck Number	
San Francisco	CA	941	103	•		
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Stripe	04/24/2019 3.20		3.20			
Street Address	Purpose					
510 Townsend St.	fee-online donation					
City	State	Zip	Code Check Number			
San Francisco	CA	94	103			

Page Total \$	
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