



## **Statement of Expenditures**

Form 31-B

R.C. 3517.10

Full Name of Committee						
Friends of Merisa Bowers						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
PayPal			06/30/2019		51.13	
Street Address Purpose						
P.O. Box 45950	Fees for June 1 - 30, 2019					
City	State	te Zip Code Check Number				
Omaha	NE	68145 automatic withdrawal		tomatic withdrawal		
To Whom Paid	<del></del>		Date (MM/DD/YYYY)		Amount	
PayPal			07/04/2019 49.19		49.19	
Street Address	Purpose					
P.O. Box 45950	Fees for July 1 - July 31, 2019					
City	State	Zip	Code Ch		eck Number	
Omaha	NE	68	145 auto		tomatic withdrawal	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Merisa K. Bowers			08/12/2019 77.23			
Street Address Purpose						
363 Higley Court	Snacks for Playdate with Candidate events					
City	State	Zip Code Check Number				
Gahanna	ОН	432	43230 ba		nk transfer	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
USPS			07/01/2019 30.30		30.30	
Street Address	Purpose					
246 Lincoln Circle Ste. H	Postage					
City	State	Zip Code		Check Number		
Gahanna	ОН	432	3230		FOMB debit card	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Pies and Pints			08/17/20	19	49.93	
Street Address	Purpose					
4205 Weaverton Lane	Lunch meeting					
City	State	Zip Code Check Number				
Columbus	OH	43219 FOMB debit card		MB debit card		

Page	Total	\$
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