OFFICE OF THE
Ohio Secretary of State

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee

Fortkamp for UA

To Whom Paid	Date (MM/DD/YYYY)	Amount
Stripe	08/06/2019	$2.48

Street Address	Purpose
510 Townsend St.	Processing Fee

City	State	Zip Code	Check Number
San Francisco	~~OH~~ CA	94103	

To Whom Paid	Date (MM/DD/YYYY)	Amount
Stripe	08/04/2019	$3.20

Street Address	Purpose
510 Townsend St.	Processing Fee

City	State	Zip Code	Check Number
San Francisco	~~OH~~ CA	94103	

To Whom Paid	Date (MM/DD/YYYY)	Amount
Paypal	08/03/2019	$1.03

Street Address	Purpose
2211 North First St.	Processing Fee

City	State	Zip Code	Check Number
San Jose	~~OH~~ CA	95131	

To Whom Paid	Date (MM/DD/YYYY)	Amount
Stripe	07/31/2019	$7.55

Street Address	Purpose
510 Townsend St.	Processing Fee

City	State	Zip Code	Check Number
San Francisco	~~OH~~ CA	94103	

To Whom Paid	Date (MM/DD/YYYY)	Amount
Stripe	07/19/2019	$1.75

Street Address	Purpose
510 Townsend St.	Processing Fee

City	State	Zip Code	Check Number
San Francisco	~~OH~~ CA	94103	

Page Total $ $16.01