



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee							
Friends of Carol Beckerle							
To Whom Paid			Date (MM/DD/YYYY)	Amount			
Kroger			11/16/20	19 \$130.05			
Street Address	Purpose						
	Lunch for Campaign Volunteers						
City	State	Zip	Code	Check Number			
	он						
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)	Amount			
Franklin County Adelante Democrats			11/18/20	19 \$100			
Street Address	Purpose						
	Political Contribution						
City	State	Zip	Code	Check Number			
	он			1015			
To Whom Paid	<u></u>		Date (MM/DD/YYYY)	Amount			
Street Address	Purpose						
City	State	Zip	Code	eck Number			
	ОН						
To Whom Paid		_	Date (MM/DD/YYYY)	Amount			
Street Address	Purpose		 				
City	State	Zip	Code	Check Number			
	ОН						
To Whom Paid			Date (MM/DD/YYYY)	Amount			
Street Address	Purpose						
City	State	Zip Code		Check Number			
	ОН						

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