



## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
WHITNEY SMITH FOR OHIO						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
PRESSWORKS			06/13/2017		1483.02	
Street Address	Purpose					
PO BOX 195	PRINTING					
City	State	Zip Code Check Number			ck Number	
PLAIN CITY	ОН	430	13064 511			
To Whom Paid	Date (MM/DD/YYYY)		Amount			
PRESSWORKS	06/13/2017		438.7			
Street Address	Purpose					
PO BOX 195	PRINTING					
City	State	Zip	Code Check		ck Number	
PLAIN CITY	ОН	430	512		2	
To Whom Paid	<u></u>	Date (MM/DD/YYYY) Amo		Amount		
WIX.COM	06/19/2017		16.0			
Street Address	Purpose					
200 SE 6TH STREET	SERVICE FEES					
City	State	Zip	Zip Code Check Number		eck Number	
FT LAUDERDALE	FL	333	301			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·	Date (MM/DD/YYYY) Amou		Amount		
WIX.COM		06/29/2017 16.0		16.0		
Street Address	Purpose					
200 SE 6TH STREET	SERVICE FEES					
City	State	Zip	Zip Code Cho		eck Number	
FT LAUDERDALE	FL	33	3301			
To Whom Paid	Date (MM/DD/YYYY)			Amount		
WIX.COM			07/05/2017		16.0	
Street Address	Purpose					
200 SE 6TH STREET	SERVICE FEES					
City	State	Zip	Zip Code Check Number		eck Number	
FT LAUDERDALE	FL	33	301			

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