



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Community Partnership for Education			
To Whom Paid Hilliard City School District Treasurer's Office		Date (MM/DD/YYYY) 02/10/2017	Amount \$138.42
Street Address 2140 Atlas Street		Purpose Printing	
City Columbus	State OH	Zip Code 43228	Check Number 1063
To Whom Paid Bridget Granger		Date (MM/DD/YYYY) 02/20/2017	Amount \$1,134.38
Street Address 1398 Glenn Ave Columbus		Purpose Printing, Mailing	
City Columbus	State OH	Zip Code 43212	Check Number 1064
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 1,272.80