



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Motil for City Council			
To Whom Paid Huntington Bank		Date (MM/DD/YYYY) 12/31/2018	Amount 36.00
Street Address P.O. Box 1558		Purpose Bank Fees	
City Columbus	State OH	Zip Code 43216	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
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 \$ 36.00