



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Lori J Elmore			
To Whom Paid Wix.com		Date (MM/DD/YYYY) 06/15/2018	Amount 14.00
Street Address		Purpose Paypal Fee for online transactions	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 07/16/2018	Amount 14.00
Street Address		Purpose Paypal Fee for online transactions	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 08/15/2018	Amount 14.00
Street Address		Purpose Paypal Fee for online transactions	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 09/17/2018	Amount 14.00
Street Address		Purpose Paypal Fee for online transactions	
City	State OH	Zip Code	Check Number
To Whom Paid Wix.com		Date (MM/DD/YYYY) 10/15/2018	Amount 14.00
Street Address		Purpose Paypal Fee for online transactions	
City	State OH	Zip Code	Check Number

Page Total \$ 70.00