JON HUSTED
Ohio Secretary of State

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee

GIBBS 4 KIDS

To Whom Paid	Date (MM/DD/YYYY)	Amount
UBER	01/09/18	26.98

Street Address	Purpose
	TRAVEL

City	State	Zip Code	Check Number
SAN FRANCISCO	~~OH~~ CA		DEBIT

To Whom Paid	Date (MM/DD/YYYY)	Amount
SMG GCCC PARKING	01/12/18	12.00

Street Address	Purpose
	PARKING

City	State	Zip Code	Check Number
COLUMBUS	OH		DEBIT

To Whom Paid	Date (MM/DD/YYYY)	Amount
COLUMBUS COMMONS	01/22/18	4.00

Street Address	Purpose
	MEALS/MEETINGS

City	State	Zip Code	Check Number
COLUMBUS	OH		DEBIT

To Whom Paid	Date (MM/DD/YYYY)	Amount
CHIPOTLE	01/24/18	11.30

Street Address	Purpose
	MEALS

City	State	Zip Code	Check Number
WHITEHALL	OH		DEBIT

To Whom Paid	Date (MM/DD/YYYY)	Amount
UBER	01/30/18	9.18

Street Address	Purpose
	TRAVEL

City	State	Zip Code	Check Number
SAN FRANCISCO	~~OH~~ CA		DEBIT

Page Total $ 63.46