

OFFICE OF THE Ohio Secretary of State

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee		-				
Citizens for Joe Bizjak						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Expenditures of \$25 or Less			05/08/2019		25.00	
Street Address	Purpose	urpose				
	meeting with donor					
City	State	Zip Code Check Number				
	он			EF	т	
To Whom Paid	<u></u>		Date (MM/DD/YYYY)		Amount	
Majority Strategies				05/16/2016 2525.00		
Street Address	Purpose				<u> </u>	
12854 Kenen Dr., Ste. 125	digital marketing					
City	State	Zip (Code Check Num		ck Number	
Jacksonville	FL	322	258		003	
To Whom Paid			Date (MM/DD/YYYY) Amount			
Street Address	Purpose					
City	State	Zip	p Code Check Number		eck Number	
	ОН					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip	Code	Che	eck Number	
	он					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
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treet Address Purpose					A	
City	State	Zip	Code	Che	eck Number	
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