

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
Citizens for Stephanie Mingo						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Ross Chambers		08/12/2019		250.00		
Street Address	Purpose					
12364 Thoroughbred Dr	Consulting					
City	State Zip Code Check Number			eck Number		
Pickerington	он	43°	147 2528			
To Whom Paid			Date (MM/DD/YYYY) Amount			
LaToya Dowdell Burger			08/30/2019 1,000.00			
Street Address	Purpose					
5016 Hickory Grove Circle	Consulting					
City	State	Zip	Code Chec		ck Number	
Groveport	он	431	125	252	29	
o Whom Paid			Date (MM/DD/YYYY)		Amount	
GZZEF; c/o Monique A. Hall			09/03/2019 100.00			
Street Address	Purpose					
P O Box 272074	Sponsorship					
City	State	Zip Code Check		ck Number		
Columbus	он	432	227 253		30	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Grove City Chamber of Commerce			09/05/2019		175.00	
Street Address	Purpose					
4069 Broadway	Parade Entry					
City	State	Zip	Code Cho		eck Number	
Grove City	он	43°	123	DC	;	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Ross Chambers			09/12/2019 250.00			
Street Address	Purpose					
12364 Thoroughbred Dr	Consulting					
City	State	Zip	p Code Check Number			
Pickerington	он	43 ⁻	4 7 2531		31	

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