



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Flower			
To Whom Paid Anedot		Date (MM/DD/YYYY) 06/05/2019	Amount \$7.00
Street Address		Purpose Processing Fees	
City	State OH	Zip Code	Check Number
To Whom Paid Anedot		Date (MM/DD/YYYY) 07/29/2015	Amount \$2.30
Street Address		Purpose Processing Fees	
City	State OH	Zip Code	Check Number
To Whom Paid Anedot		Date (MM/DD/YYYY) 08/11/2019	Amount \$.70
Street Address		Purpose Processing Fees	
City	State OH	Zip Code	Check Number
To Whom Paid Anedot		Date (MM/DD/YYYY) 10/03/2019	Amount \$.70
Street Address		Purpose Processing Fees	
City	State OH	Zip Code	Check Number
To Whom Paid Anedot		Date (MM/DD/YYYY) 10/08/2019	Amount \$10.30
Street Address		Purpose Processing Fees	
City	State OH	Zip Code	Check Number

Page Total \$ 21.00