



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee COMMITTEE TO EXTEND PROGRESS				
To Whom Paid STAPLES		Date (MM/DD/YYYY) 10/05/2018		Amount -33.31
Street Address 3790 EAST BROAD STREET		Purpose OWED TO KIM MAGGARD		
City WHITEHALL	State OH	Zip Code 43213	Check Number REVERSAL	
To Whom Paid SIGNROCKET.COM		Date (MM/DD/YYYY) 10/03/2018		Amount 537.50
Street Address 340 BROADWAY AVENUE		Purpose YARD SIGN PRINTING		
City ST. PAUL PARK	State MN	Zip Code 55071	Check Number DEBIT CARD	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	Zip Code	Check Number	