



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee KEEP HILLIARD BEAUTIFUL						
To Whom Paid PNC BANK			Date (MM/DD/YYYY) 12/01/20		Amount 5.00	
Street Address PO BOX 609	Purpose SERVICE C	HA	RGE			
City PITTSBURG		Zip Code Check Number N/A			i	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State OH	Zip (Code Check Number		eck Number	
To Whom Paid	_		Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State OH	Zip (Code Check Number		ck Number	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State OH	Zip	Zip Code		Check Number	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State OH	Zip Code Check Number		eck Number		

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