

## Statement of Expenditures

Form 31-F

R.C. 3517.10

Full Name of Committee				****		
Laborers' Local 423						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Rob for Ohio			09/13/2017		10,000.00	
Street Address	Purpose	1	. , .			
4100 Regent St. Suite A	Political Contribution					
City	State	Zip Code Check Number			ck Number	
Columbus	ОН	43219 1198		98		
To Whom Paid	1		Date (MM/DD/YYYY)		Amount	
Klein Committee			09/13/201		7 5,000.00	
Street Address	Purpose					
545 E. Town St.	Political Contributioin					
City	State	Zip Code Check Numb		ck Number		
Columbus	ОН	43215		119	99	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Morehart for Judge			09/13/2017 1,000.00			
Street Address	Purpose					
225 E. Broad St.	Political Contribution					
City	State	Zip Code Check Number		ck Number		
Columbus	он	43215 1200		00		
To Whom Paid	<u>-</u>		Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip	Code	Che	eck Number	
o.,	ОН	•				
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip Code Check Number		eck Number		
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Page Total \$	16,000.00