

Statement of Expenditures

Form 31-B

Page __

R.C. 3517.10

Full Name of Committee						
Reelect Lisa Whiting for Hilliard Schools						
To Whom Paid		1	Date (MM/DD/YYYY)		Amount	
Lisa Whiting			10/17/201		\$589.06	
Street Address	Purpose					
801 Thorncrest Ct	Yard Signs					
City	State Z	Zip Code Check Number				
Galloway	он 4	43119 1001			01	
To Whom Paid	<u> </u>	[Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State Z	Zip Code		Check Number		
S.I.y	ОН	_,,		00		
To Whom Paid		Date (MM/DD/YYYY)		Amount		
Street Address	Purpose					
City	State Z	Zip Code Check Number				
	он					
To Whom Paid		[Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
	04-4-	7:- 0		<u>Ch</u>	eck Number	
City	State Z	Zip C	ode	Cite	eck number	
	011	1			r	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State Z	Zip Code Check Number		eck Number		
	он					

Page Total \$	5589.06
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