



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CHRIS AMOROSE GROOMES FOR DUBLIN				
To Whom Paid BUCKEYE COMMUNITY CALENDARS		Date (MM/DD/YYYY) 10/05/2018		Amount 500.00
Street Address 11400 PICKERINGTON ROAD		Purpose IMAGE ADS		
City PICKERINGTON	State OH	Zip Code 43147	Check Number 1028	
To Whom Paid THE HUNTINGTON NATIONAL BANK		Date (MM/DD/YYYY) 11/15/2018		Amount 3.00
Street Address P.O. BOX 1558 EA1W37		Purpose MONTHLY SERVICE FEE		
City COLUMBUS	State OH	Zip Code 43216	Check Number AUTO-DEBIT	
To Whom Paid THE HUNTINGTON NATIONAL BANK		Date (MM/DD/YYYY) 12/17/2018		Amount 3.00
Street Address P.O. BOX 1558 EA1W37		Purpose MONTHLY SERVICE FEE		
City COLUMBUS	State OH	Zip Code 43216	Check Number AUTO-DEBIT	
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	

Page Total \$ **506.00**