



## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee	<del></del>				
WHITNEY SMITH FOR OHIO					
To Whom Paid			Date (MM/DD/YYYY)		Amount
WIX.COM			03/04/2019		16.00
Street Address	Purpose				
200 SE 6TH STREET	SERVICE FEES				
City	State	Zip Code Check Number			
FT LAUDERDALE	FL	333	301		
To Whom Paid	Date (MM/DD/YYYY) Amou			Amount	
WIX.COM	03/05/2019 16.00			16.00	
Street Address	Purpose				
200 SE 6TH STREET	SERVICE FEES				
City	State	Zip	Code Check Number		ck Number
FT LAUDERDALE	FL	333	301		
To Whom Paid	<del></del>		Date (MM/DD/YYYY) Amount		
WIX.COM		03/19/2019 16.00			
Street Address	Purpose				
200 SE 6TH STREET	SERVICE FEES				
City	State	Zip	Code Check Number		ck Number
FT LAUDERDALE	FL	333	301		
To Whom Paid	Date (MM/DD/YYYY) A		Amount		
WIX.COM		04/01/2019 16.00			16.00
Street Address	Purpose				
200 SE 6TH STREET	SERVICE FEES				
City	State	Zip	Code Check Number		ck Number
FT LAUDERDALE	FL	333	301		
To Whom Paid		Date (MM/DD/YYYY) Amount		Amount	
WIX.COM	04/08/2019			16.00	
Street Address	Purpose				
200 SE 6TH STREET	SERVICE FEES				
City	State	Zip	Code Check Number		eck Number
FT LAUDERDALE	FL	333	301		

	30.00	
Page Total \$	30.00	