

Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee				
Supporters of Sam Shim				
To Whom Paid		Date (MM/DD/YYYY)		Amount
Sam Shim		10/10/2017		11.96
Street Address		Purpose		
6834 Maxwellton Ct		Bottled water		
City	State	Zip Code	Check Number	
Columbus	OH	43235		
To Whom Paid		Date (MM/DD/YYYY)		Amount
Sam Shim		10/10/2017		17.98
Street Address		Purpose		
6834 Maxwellton Ct		Candy for parade		
City	State	Zip Code	Check Number	
Columbus	OH	43235		
To Whom Paid		Date (MM/DD/YYYY)		Amount
Sam Shim		10/10/2017		170.70
Street Address		Purpose		
6834 Maxwellton Ct		Campaign literature		
City	State	Zip Code	Check Number	
Columbus	OH	43235		
To Whom Paid		Date (MM/DD/YYYY)		Amount
Sam Shim		10/10/2017		132.19
Street Address		Purpose		
6834 Maxwellton Ct		Campaign literature		
City	State	Zip Code	Check Number	
Columbus	OH	43235		
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
	OH			