

## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
Friends for Amy Lloyd						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
PayPal			08/25/2019		\$1.03	
Street Address	Purpose					
PO Box 45950	Transaction Fee					
City	State	Zip Code Check Number			ck Number	
Omaha	NE	681	PayPal fe		yPal fee	
To Whom Paid			Date (MM/DD/YYYY) Amount			
PayPal		08/25/20	08/25/2019 \$1.03			
Street Address	Purpose					
PO Box 45950	Transaction Fee					
City	State	Zip	Code Check Number		ck Number	
Omaha	NE	681	45 PayPal fee		yPal fee	
To Whom Paid		Date (MM/DD/YYYY) Amount				
PayPal			08/26/2019 \$1.03			
Street Address	Purpose					
PO Box 45950	Transaction Fee					
City	State	Zip Code Check Number			eck Number	
Omaha	NE	681	145 Pa		yPal fee	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
PayPal			08/26/2019 \$1.03			
Street Address	Purpose					
PO Box 45950	Transaction Fee					
City	State	Zip	Code	Che	eck Number	
Omaha	NE	681	45	Pa	yPal fee	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
PayPal			08/26/2019 \$1.03			
Street Address	Purpose					
PO Box 45950	Transaction Fee					
City	State	Zip Code Check Number				
Omaha	NE	681	PayPal		yPal fee	
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Page Total \$ 5.15