



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends for Amy Lloyd			
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/25/2019	Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee	
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/25/2019	Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee	
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/26/2019	Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee	
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/26/2019	Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee	
City Omaha	State NE	Zip Code 68145	Check Number PayPal fee
To Whom Paid PayPal		Date (MM/DD/YYYY) 08/26/2019	Amount \$1.03
Street Address PO Box 45950		Purpose Transaction Fee	
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Page Total \$ 5.15