



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee People for Page			
To Whom Paid Franklin County Democratic Lawyers Club		Date (MM/DD/YYYY) 12/12/17	Amount 150.00
Street Address 41 South High Street		Purpose Membership Fee	
City Columbus	State OH	Zip Code 43201	Check Number Debit Card
To Whom Paid Columbus Partnership		Date (MM/DD/YYYY) 12/5/17	Amount 604.00
Street Address 150 South Front Street		Purpose Young American Leaders Program	
City Columbus	State OH	Zip Code 43215	Check Number 1109
To Whom Paid Always With Us Charity		Date (MM/DD/YYYY) 12/1/17	Amount 200.00
Street Address 3025 Brice Road		Purpose Event Sponsorship	
City Brice	State OH	Zip Code 43019	Check Number 1111
To Whom Paid Three Leaf Productions, Inc		Date (MM/DD/YYYY) 12/28/17	Amount 358.30
Street Address 261 W. Johnstown Road		Purpose Christmas Card Printing	
City Gahanna	State OH	Zip Code 43230	Check Number 1112
To Whom Paid Columbus Education Association		Date (MM/DD/YYYY) 1/11/18	Amount 35.00
Street Address 929 E. Broad Street		Purpose Event Ticket	
City Columbus	State OH	Zip Code 43205	Check Number 1090

Page Total \$ 1,347.30