



## Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee				
Friends of Tina Pierce				
To Whom Paid			Date (MM/DD/YYYY)	Amount
PayPal			10/25/201	19 \$4.40
Street Address	Purpose			
2211 North First Street	Online donation processing fee			
City	State Zip Code Check Number			
San Jose	CA 🔻	951	131	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State OH	Zip	Code	Check Number
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State Zip Code Check Number		Check Number	
	ОН			
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State OH	Zip	Code	Check Number
To Whom Paid			Date (MM/DD/YYYY)	Amount
Street Address	Purpose			
City	State OH	Zip	Code	Check Number

Page Total \$	4.40	