



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee				
Franklin County Adelante Democrats				
To Whom Paid		Date (MM/DD/YYYY)	Amount	
5/3 Bank			11/13/2019 11.00	
Street Address	Purpose			
PO Box 630900	Bank Fee			
City	State Zip Code Check Number			
Cincinnati	OH 45263 n/a			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·	Date (MM/DD/YYYY)	Amount	
5/3 Bank		12/12/20	019 11.00	
Street Address	Purpose			
PO Box 630900	Bank Fee			
City	State Z	ip Code	Check Number	
Cincinnati	он 4	15263	n/a	
To Whom Paid		Date (MM/DD/YYYY)	Amount	
Reynoldsburg Democrats		12/03/20	019 250.00	
Street Address Purpose				
requesting images	Campaign Contribution			
City	State Z	ip Code	Check Number	
	ОН		126	
To Whom Paid	*************************************	Date (MM/DD/YYYY)	Amount	
Monica Cerrezuela	12/12/2019 100.00			
Street Address	Purpose			
	Event Reimbursement			
City	State Z	ip Code	Check Number	
	он		127	
To Whom Paid	<u> </u>	Date (MM/DD/YYYY)	Amount	
treet Address Purpose				
City	State Z	ip Code	Check Number	
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Page Total \$	372.00	