



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee						
COMMITTEE TO ELECT MORGAN MASTERS						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Northland Community Council			05 10		35.00	
Street Address	Purpose	se				
P.O. Box 297836	Banquet	anquet				
City	State	Zip	Code Check Number			
Columbus	ОН	43	229	1527		
To Whom Paid	 		Date (MM/DD/YYYY)		Amount	
NetBrands Media		05 10 17 335.00				
Street Address	Purpose	se				
14550 Beechnut St	Wristbands					
City	State	Zip	Code Check Number		ck Number	
Houston	TX	77	083	De	bit Card	
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)		Amount	
Oakhaven Golf Club	05 10 17 500.00			500.00		
Street Address	Purpose					
2871 US-23	Fundraiser Event Location Reservation					
City	State	Zip	Code Check Number			
Delaware	ОН	43	015	De	bit Card	
To Whom Paid		Date (MM/DD/YYYY) Amount			Amount	
Central Ohio Labor Council			05 15 17 150.00			
Street Address	Purpose					
1545 Alum Creek Dr.	Charity Hole Sponsorship					
City	State	Zip	Code	Check Number		
Columbus	ОН	43	209	1530		
To Whom Paid		Date (MM/DD/YYYY) Amount		Amount		
7th Ave Mission			05 14	17	10.00	
Street Address	Purpose					
28 E 7th Ave	Donation					
City	State	Zip	Code Check Number			
Columbus	ОН	43	201	15	32	

Page Total \$	1030.00	