



# Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Aileen Wagner			
To Whom Paid Amazon Pay/Erin Condren Designs		Date (MM/DD/YYYY) 01/01/2019	Amount 48.53
Street Address		Purpose Calendar/planner	
City Hawthorne	State CA	Zip Code	Check Number
To Whom Paid ACH Trace		Date (MM/DD/YYYY) 01/03/2019	Amount 2.51
Street Address		Purpose Credit card processing	
City	State OH	Zip Code	Check Number
To Whom Paid ACH Trace		Date (MM/DD/YYYY) 02/04/2019	Amount 2.50
Street Address		Purpose credit card processing	
City	State OH	Zip Code	Check Number
To Whom Paid ACH Trace		Date (MM/DD/YYYY) 03/04/2019	Amount 2.50
Street Address		Purpose Credit card processing	
City	State OH	Zip Code	Check Number
To Whom Paid Name Badges International		Date (MM/DD/YYYY) 03/05/2019	Amount 11.32
Street Address 4601 Sheridan Street, Suite 300		Purpose Name tag	
City Hollywood	State FL	Zip Code 33021	Check Number

Page Total \$ 67.36