



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee			-	,	;	
Citizens for Rankin						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Jennifer Brunner Committee			12/18/2019		206.63	
Street Address	Purpose	l		_		
35 North Fourth Street, Suite 200	Donation	Donation				
City	State	Zip (Code	le Check Number		
Columbus	он		215	32461229		
To Whom Paid	<u>-</u>		Date (MM/DD/YYYY)		Amount	
Street Address	Purpose	,				
City	State OH	Zip	Code	Check Number		
To Whom Paid		Date (MM/DD/YYYY) Amount		Amount		
Street Address	Purpose	γ			· · · · · · · · · · · · · · · · · · ·	
City	State	State Zip Code Check Numl		eck Number		
	он					
To Whom Paid			Date (MM/DD/YYYY)	.'	Amount	
Street Address	Purpose					
City	State OH	Zip (Zip Code Check Number		eck Number	
To Whom Paid			Date (MM/DD/YYYY)	•	Amount	
Street Address	Purpose	Purpose				
City	State OH	Zip (Zip Code Check Number		ck Number	

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raye Total \$	<u> </u>	