



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Supporters of Sam Shim			
To Whom Paid Sam Shim		Date (MM/DD/YYYY) 11/10/2017	Amount 25.82
Street Address 6834 Maxwellton Ct		Purpose Reimbursement for Facebook Ad - 10/31/17	
City Columbus	State OH	Zip Code 43235	Check Number
To Whom Paid Sam Shim		Date (MM/DD/YYYY) 11/10/2017	Amount 50.11
Street Address 6834 Maxwellton Ct		Purpose Reimbursement for Facebook Ad - 10/13/17	
City Columbus	State OH	Zip Code 43235	Check Number
To Whom Paid Sam Shim		Date (MM/DD/YYYY) 11/10/2017	Amount 25.80
Street Address 6834 Maxwellton Ct		Purpose Reimbursement for Multipurpose Paper - 10/17/17	
City Columbus	State OH	Zip Code 43235	Check Number
To Whom Paid Sam Shim		Date (MM/DD/YYYY) 11/10/2017	Amount 25.80
Street Address 6834 Maxwellton Ct		Purpose Reimbursement for Multipurpose Paper	
City Columbus	State OH	Zip Code 43235	Check Number
To Whom Paid Sam Shim		Date (MM/DD/YYYY) 11/10/2017	Amount 50.00
Street Address 6834 Maxwellton Ct		Purpose Reimbursement for Gas for Dedicated Campaign Jeep -11/09/17	
City Columbus	State OH	Zip Code 43235	Check Number

Page Total \$ 177.53