31-B R.C. 3517.10

FOR PAPER FILING ONLY Statement of Expenditures

	À
Page	4

Prescribed by Secretary of State 2/01

Name of Committee in Full Re-Elect Becky Stinchcomb for May	or Commi	ittee				
To Whom Paid Rebecca W. Stinchcomb				4 0 7	Amount \$135.00	
Address 1012 Cloverly Dr.	Loan repayment (website registration renewal)					
^{City} Gahanna	State OH	Zip Code 43230	Check Numb 1058	er		
To Whom Paid			M D	Y	Amount	
Address	Ригроже					
Сіку	OH State	Zip Code	Check Numb	er		
To Whom Paid			M D	Y	Атоипт	
Address	Purpose				,	
City	OH State	Zip Code	Check Numb	Check Number		
To Whom Paid			M D	Y	Amount	
Address	Ригроме					
City	State OH	Zip Code	Check Numb	ег		
To Whom Paid	•		M D	Ÿ	Amount	
Address	Purpose					
City	OH State	Zip Code	Check Numb	Check Number		
To Wham Paid				Y	Amount	
Address	Purpose					
City	OH.	Zip Code	Check Numb	er		
To Whom Paid				l V	Amoun	
Address	Puipose		<u> </u>	·		
City	OH State	Zip Cade	Check Numb	oer		
To Whom Paid			M D	Y	Amount	
Address	Ригрозе					
Ciry	State OH	Zip Code	Check Numb	Check Number		