



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee			
Handler For Gahanna Schools			
To Whom Paid		Date (MM/DD/YYYY)	Amount
The Custom Design Co.		9/23/19	\$ 731.25
Street Address		Purpose	
933 Schillingwood Dr		Yard Signs	
City	State	Zip Code	Check Number
Gahanna, OH	OH	43230	Starter 7
To Whom Paid		Date (MM/DD/YYYY)	Amount
High Point PTA		9/12/19	\$ 300.00
Street Address		Purpose	
700 Venetian Way		Walk-A-Thon Sponsorship	
City	State	Zip Code	Check Number
Gahanna	OH	43230	Starter 6
To Whom Paid		Date (MM/DD/YYYY)	Amount
City of Gahanna		10/9/19	\$ 95.00
Street Address		Purpose	
200 S Hamilton Rd		Creepside Event Table Sponsor Vendor	
City	State	Zip Code	Check Number
Gahanna	OH	43230	Starter 8
To Whom Paid		Date (MM/DD/YYYY)	Amount
Ohio Republican Party		10/21/19	\$ 526.94
Street Address		Purpose	
15 N 4th St		Mail literature for Campaign	
City	State	Zip Code	Check Number
Columbus	OH	43215	Starter 9
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State	Zip Code	Check Number
	OH		

Page Total \$ 1,653.19