

Page ___

Statement of Expenditures

R.C. 3517.10

Full Name of Committee		_			
run rame of committee	- (1)				
Citizens for Doug	mth			- <u>-</u>	
To Whom Paid			Date (MM/DD/YYYY)	Amount	
45PS - Berley Brack			10/10/17	49. =	
Street Address	Purpose		1		
2935 E Main St		Pas	tage		
City	State	Zip	Code	Check Number	
Bexley	ОН		43209		
To Whom Paid			Date (MM/DD/YYYY)	Amount	
Cus			10/10/17	S_8' ;ē	
Street Address	Purpose				
918 N High St	Stationery				
City	State	Zip	Code	Check Number	
worthister	ОН		43085		
To Whom Paid			Date (MM/DD/YYYY)	Amount	
Ohike Delvine for Ohio			7/25/17	200 =	
Street Address Purpose					
City Columbus	Contribution				
City	State		Code	Check Number	
Columbus	он	ų	13234		
To Whom Paid	!		Date (MM/DD/YYYY)	Amount	
Street Address	Purpose				
City	State	Zip	Code	Check Number	
	ОН				
To Whom Paid	<u></u>		Date (MM/DD/YYYY)	Amount	
Street Address	Purpose				
City	State	Zip	Code	Check Number	
	он				

age Total \$	307.	0>
age Total \$	<u> 307.</u>	