



## Statement of Expenditures

Form 31-B

R.C. 3517.10

	*******					
Full Name of Committee						
Friends For Sorenson						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Franklin County Board of Elections			08/06/2019		30	
Street Address Purpose						
Morse Road	Filing Fee					
City	State Zip Code Check Number			eck Number		
Columbus	он	43	880002			
To Whom Paid			Date (MM/DD/YYYY) Amount			
Grassroots Strategies			08/09/2019 260.15			
Street Address	Purpose					
5990 East Livingston Ave	Marketing Materials					
City	State	Zip	Code Check Number			
Reynoldsburg	он	430	068	880	0003	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Ava's Taste of the Caribbean					8	
Street Address	Purpose					
999 King Ave	Food for campaign meeting					
City	State	State Zip Code Check Number			ck Number	
Columbus	ОН	43212				
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Sign Rocket			09/05/2019 1132.5			
Street Address	Purpose					
340 Broadway Ave	Yard Signs					
City	State	Zip	Code	Che	ck Number	
St. Paul	MN	550	)71			
To Whom Paid			Date (MM/DD/YYYY)		Amount	
GO FAN			09/06/20	19	6	
Street Address	Purpose					
6445 Shiloh Road Suite B	Marketing/Canvassing (high school football game)					
City	State	State Zip Code Check Number			k Number	
Alpharetta	GA	300	05			

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