



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee GIBBS 4 KIDS COMMITTEE			
To Whom Paid KEY BANK		Date (MM/DD/YYYY) 12/31/2019	Amount 3.00
Street Address 88 E BROAD ST		Purpose BANK SERVICE CHARGES	
City Columbus	State OH	Zip Code 43215	Check Number DEBIT
To Whom Paid KEY BANK		Date (MM/DD/YYYY) 12/31/2019	Amount 5.00
Street Address 88 E BROAD ST.		Purpose BANK SERVICE CHARGES	
City Columbus	State OH	Zip Code 43215	Check Number DEBIT
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number