



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee	i					
Citizens for Lynch						
To Whom Paid			Date (MM/DD/YYYY)		Amount	
First Merchants Bank			11/23/20		18 \$5.00	
Street Address	ddress Purpose					
200 E. Jackson St	Bank Fee					
City	State	Zip Code Check Number				
Muncie	IN	47305 Direct Transfer				
To Whom Paid			Date (MM/DD/YYYY)		Amount	
First Merchants Bank	12/26/20		18	8 \$5.00		
Street Address	Purpose					
200 E. Jackson St	Bank Fee					
City	State	Zip Code Check Number		eck Number		
Muncie	IN	473	305 Direct Transfer		ect Transfer	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
First Merchants Bank		12/26/20		18	8 \$5.00	
Street Address	Purpose					
200 E. Jackson St	Bank Fee					
City	State	Zip Code Check Number				
Muncie	IN	473	7305 Direct Transfer		ect Transfer	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip Code Check Number				
	IN					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Street Address	Purpose					
City	State	Zip Code Check Number		eck Number		
	IN					

Page Total \$	15.00